# Substance Abuse and Crime Prevention Act of 2000: Analysis of FY 2003/04 Plans from the 58 Counties

This report was developed by Health Systems Research, Inc., for the Center for Substance Abuse Treatment of the Substance Abuse and Mental Health Services Administration, and the California Department of Alcohol and Drug Programs under Contract No. 270-00-7071.

## Prepared by:

William E. Ford, Ph.D. Stephanie Hauser Health Systems Research, Inc. Washington, D.C.

September 30, 2004

## **Table of Contents**

Executive Summary	1
Purpose of This Document	2
Analysis of the Plans for the 12 Large Counties	4
Analysis of the Plans for the 9 Medium Counties	11
Analysis of the Plans for the 37 Small Counties	18
Key Features of the County Plans	29
Appendix AList of Services by Co	ounty Group
Appendix BFY 2001/02, FY 2002/03, and FY 2003/04 County Plan G	Comparisons
Appendix CStated Reasons for Service Reductions in the FY 2003/04 C	County Plans

## I. EXECUTIVE SUMMARY<sup>1,2,3</sup>

The regulations promulgated pursuant to the California Substance Abuse and Crime Prevention Act (SACPA) of 2000 require that all counties submit a plan (§9515(b)(2), Chapter 2.5, Division 4, Title 9, California Code of Regulations (CCR)) to the Department of Alcohol and Drug Programs (ADP) in order to receive funding for services covered by the Act. The purpose of this document is to summarize the highlights of the fiscal year (FY) 2003/04 county plans. Each plan contains a programmatic and a fiscal section. The programmatic section includes a description of the SACPA services to be offered, how SACPA services will be coordinated, and the process for developing the plans. The fiscal section describes how counties plan to expend SACPA funds, as well as projections for capacity and services.

There are several significant highlights of the analysis of all 58 counties, including:

- The 58 counties projected 60,895 referrals to be made for SACPA services during FY 2003/04. A vast majority (88.8%) of these referrals would come from the court/probation system. This compares with the FY 2002/03 estimate of 62,377 referrals.
- Fifty-seven (98.3%) of the 58 counties planned to do drug testing of SACPA clients using funds from the Substance Abuse Treatment and Testing Accountability (SATTA) Program.
- For FY 2003/04, 54 (93.1%) of the 58 counties reported having carried over funds from FY 2002/03.
- The average percentage of total funds available planned to be spent for FY 2003/04 by the 58 counties was 90.6% (range: 14.9% to 100.0%). For FY 2002/03, the average planned to be spent was 91.2% (range: 24.3% to 117.2%).
- The average percentage of funds planned to be spent for drug treatment-related services by the 58 counties for FY 2003/04 is 77.1% (range: 55.1% to 100.0%); and the average percentage planned to be spent for criminal justice activities is 22.9% (range: 0% to 44.9%). The corresponding amounts for FY 2002/03 were 81.4% (range: 58.4% to 100.0%) for

\_

<sup>&</sup>lt;sup>1</sup> This analysis was funded by the Center for Substance Abuse Treatment (CSAT) through CSAT's "State Health Care Reform Technical Assistance, and Knowledge Synthesis and Dissemination Project" (Contract No. 270-00-7071). The author wishes to thank Jessica McDuff, M.A. for her contributions to this analysis.

<sup>&</sup>lt;sup>2</sup> This document was prepared using data from the hard copy of county plans. These data were compared with that contained in the SACPA Reporting Information System (SRIS). When differences were founds, the SRIS data were used. It is possible that some of the expenditure data reflects actual rather than planned expenditures for some counties.

<sup>&</sup>lt;sup>3</sup> This report is being issued after the close of FY 2003/04. As a result, the past tense is used in reporting FY 2003/04 data.

treatment-related services and 18.6% (range: 0 to 49.0%) for criminal justice.

• Thirty-five (60.3%) of the 58 counties projected an increase in total capacity of services during FY 2003/04. In FY 2002/03, 45 (77.6%) planned for an increase in total capacity.

Table 1	summarizes	key	provisions	of the	county pla	ns.

	Table 1: Summary of County Plans*								
	Projected Rate of Mean Total SACPA Referrals per 1000 Population	Mean % Allocation Plus Carryover Planned to be Expended of FY 2003/04	Mean % of FY 2003/04 Allocation Plus Carryover Planned for Expenditure for Services	Mean % of FY 2003/04 Anticipated Total Capacity Increase					
Large Counties	1.7	94.1%	75.9%	20.1%					
Medium Counties	2.1	81.4%	79.1%	20.6%					
Small Counties	2.5	85.7%	76.2%	50.6%					

For FY 2003/04, there are some important differences across county size (large, medium, and small). For example, the anticipated rate of probation/court and parole referrals per 1,000 population was highest for the small counties, indicating that they are expecting SACPA to have greater effect than the medium or large counties. The expected increase in total capacity was highest among the small counties. The average of the total capacity increase for the 37 small counties is 50.6%, which is influenced by six counties reporting over a 100.0% capacity increase. If these six counties were not included, the increase in capacity for small counties was comparable (14.4%) to the large counties. Using this adjusted figure for capacity increase in the small counties, the medium counties plan for the largest increase in total treatment-related capacity.

#### II. PURPOSE OF THIS DOCUMENT

The regulations promulgated under the California Substance Abuse and Crime Prevention Act (SACPA) of 2000 require that all counties submit a plan (§9515(b)(2), Ch. 2.5, Div. 4, Title 9, CCR) to the Department of Alcohol and Drug Programs (ADP) in order to receive funding for services covered by this Act. The purpose of this document is to summarize the highlights of the FY 2003/04 plans submitted by the counties. The plans contain a programmatic and a fiscal section. The programmatic section includes a description of the SACPA services to be offered, how SACPA services will be coordinated, and the process for developing the plans. The fiscal section describes how counties plan to expend SACPA

funds, and projections for service expansion.<sup>4</sup>

This document provides an analysis of the county plans grouped by county size. The counties are divided into three groups according to population: large (N=12), medium (N=9), and small (N=37). This categorization is based upon that developed by the County Alcohol and Drug Program Administrators Association of California (CADPAAC).

An analysis of the programmatic and fiscal sections of the plans for each of the three

The analysis of the programmatic portion of each county plan includes:

- Identification of the lead agency chosen;
- A description of the planning process;
- The types of SACPA services planned;
- The anticipated referrals from probation/court and parole;
- The planned use of drug testing; and
- Client assessment and placement procedures.

categories of counties will be provided. The programmatic discussion includes a description of the planning process, the types of SACPA services planned, the anticipated number of referrals from probation or parole, the use of drug testing, and client assessment and placement procedures. The fiscal analysis includes a discussion of the amount of funds allocated and planned to be spent for FY 2002/03, overall funds planned to be spent in each of the counties for FY 2003/04, the amount of funds planned to be spent for treatment-

related services and criminal justice activities, and projected capacity. Appendix B contains a supplementary analysis of the FY 2001/02, FY 2002/03 and FY 2003/04 county plans to identify possible emerging trends. Appendix C contains reasons stated by the counties for service reductions in the FY 2003/04 county plans.

The analysis of the fiscal portion of each county plan includes:

- Total funds planned to be spent in each of the counties for FY 2003/04:
- The amount of funds planned to be spent for treatment-related services and criminal justice activities in FY 2003/04; and
- Projected capacity increase.

<sup>&</sup>lt;sup>4</sup> This document contains text boxes summarizing information contained in the FY 2001/02, FY 2002/03, and FY 2003/04 county plans. These summaries are for information only and may not reflect actual trends. The county plans are designed to forecast how funds are planned to be used. They are not an accounting for how funds were or are actually used, particularly as those expenditures relate to actual services delivered.

#### III. Analysis of the Plans for the 12 Large Counties

This section of the document provides an analysis of the plans for the 12 large counties, consisting of: Alameda, Contra Costa, Fresno, Los Angeles, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, Santa Clara, and Ventura. The combined population of these counties is 27.4 million or approximately 77.0% of the State's total population. The total amount of funds available to these counties for FY 2003/04 was \$115,736,283 which is 70.2% of the total SACPA funds available (\$164,938,079) for the counties for the year. The total available funds in FY 2003/04 include funds carried over from FY 2002/03.

## A. Programmatic Analysis

The following sections summarize the programmatic information required by SACPA regulations for the county plans.

## 1. Lead Agency

Ten (83.3%) of these 12 large counties designated their behavioral health or alcohol and drug services agency/division as the lead agency for coordinating SACPA services. One county designated the county executive office and one designated the health care agency as the lead agency. None of the 12 large counties designated probation or other criminal justice departments as the lead agency. See Table 2.

## For the 12 large counties:

- During FY 2001/02, seven (58.3%)
   of these counties designated their
   behavioral health or alcohol and
   drug services agency/division as the
   lead agency.
- In FY 2002/03 and FY 2003/04, 10 (83.3%) of these 12 large counties designated their behavioral health or alcohol and drug services agency/division as the lead agency for coordinating SACPA services.

## 2. Planning Process

All of the 12 large county plans indicated that "impacted community parties" were involved in the FY 2003/04 SACPA planning process. The entities involved varied across counties. Six (50%) of these county plans stated specifically that "clients/client groups" were involved in the process, and four (33%) of the 12 large county plans said that they had federally

recognized American Indian tribes in their county, and that these tribes were part of the SACPA planning process and 3 (25%) made no mention of American Indian Tribes. See

Table 2.

	Table 2: Pi	AN ELEMENTS F	OR THE 12 LARGE	E COUNTIES	
County	Lead Agency	Impacted Community Parties	Clients	Indian Tribes	Drug Test
Alameda	Health (BH)	Yes	Yes	No	Yes
Contra Costa	Health (SA)	Yes	Yes	No	Yes
Fresno	Health (SA)	Yes	Not mentioned	Yes	Yes
Los Angeles	Health (A&D)	Yes	Yes	Yes	Yes
Orange	Health (A&D)	Yes	No	No	Yes
Riverside	Health (MH)	Yes	No	Yes	Yes
Sacramento	Health (A&D)	Yes	Yes	No	Yes
San Bernadino	Health	Yes	Yes	Yes	Yes
San Diego	Health (A&D)	Yes	Not mentioned	Not mentioned	Yes
San Francisco	Health (A&D)	Yes	Yes	No	No*
Santa Clara	County Executive	Yes	Not mentioned	Not mentioned	Yes
Ventura	Health (A&D)	Yes	Not mentioned	Not mentioned	Yes

<sup>\*</sup>San Francisco will conduct random drug testing, but not all clients will be required to be tested.

## 3. Drug Testing

Drug treatment programs often use drug testing to monitor an individual's compliance with treatment. Frequency of drug testing should reflect the clinical status of the client, based upon severity of abuse, progress in treatment, and/or relapse potential. Programs also randomly administer drug testing to monitor clients' compliance. In FY 2002/03, the California legislature passed the Substance Abuse Treatment and Testing Accountability Program (SB 223, Chapter 721, Statutes of 2001) that appropriated funds to the counties to conduct drug testing of SACPA-eligible clients. Eleven of the large counties planned to conduct such tests in FY 2003/04. San Francisco county plans to conduct random drug testing, but not all clients were required to be tested. See Table 2.

#### 4. Types of Services

Table A1 in Appendix A lists the types of services and activities anticipated to be provided to SACPA-eligible clients, using each of the 19 sub-categories of services that have been

## 5. Client Population (Parole and Probation)

The 12 large counties estimated that a total of 43,797 referrals would be made to SACPA services during FY 2003/04. See Table 3 for estimates by county of referrals (number and percentage of total) from either the court/probation or parole systems, as well as the total number of referrals estimated for FY 2003/04.

#### 6. Assessment and Placement

Eleven (91.7%) of the 12 large counties said that the county alcohol and other drug agency would be involved with the assessment and placement of SACPA-eligible clients. Six (50.0%) of these

## For the 12 large counties:

- Between FY 2001/02 and FY 2002/03, the estimates of parole and court/probation referrals for SACPA services decreased by 9.7% (from 46,089 to 41,616 referrals). Between FY 2002/03 and FY 2003/04, the estimates of parole and court/probation referrals increased by 1.02% (from 41, 616 to 42,297)
- Between FY 2001/02 and FY 2002/03, seven of the 12 large counties estimated a decrease in the number of projected referrals, four estimated an increase, and one estimated no change. Between FY 2002/03 and FY 2003/04, six of the large counties estimated an increase in referrals, three estimated a decrease, and three estimated no change.

counties stated that multiple entities (e.g., alcohol/drug treatment agency, probation, courts)

Table 3: Estimated		MBER AND PE		Source foi	R THE 12 LARGE	
County Name	Referral Court/Pr		Referrals f	rom Parole	Total Estimated Number of	
County 1 mine	Number	%	Number	%	Referrals	
Alameda	2,155	86.0%	350	14.0%	2,505	
Contra Costa	854	93.1%	63	6.9%	917	
Fresno	1,900	95.0%	100	5.0%	2,000	
Los Angeles	14,193	87.5%	2,028	12.5%	16,221	
Orange	4,000	85.9%	657	14.1%	4,657	
Riverside	2,000	90.9%	200	9.1%	2,200	
Sacramento	1,468	89.3%	176	10.7%	1,644	
San Bernardino	1,330	76.9%	400	23.1%	1,730	
San Diego	3,908	89.0%	481	11.0%	4,389	
San Francisco	864	85.7%	144	14.3%	1,008	
Santa Clara	2,802	92.6%	224	7.4%	3,026	
Ventura	3,360	96.0%	140	4.0%	3,500	
12-County Total	38,834		4,963		43,797	
12-County Mean	3,236	89.0%	414	11.0%	3,650	

would be responsible for the assessment and placement process. Eleven (91.7%) of the 12 large counties plan to use the Addiction Severity Index (ASI) as one of their assessment tools. Six (50.0%) of the counties also plan to use the American Society of Addiction Medicine Patient Placement Criteria (ASAM PPC) as one of the assessment tools for SACPA-eligible clients. Six counties (50.0%) planned to use other assessment tools also. See Table 4 for comparison of the entities responsible for SACPA client placement and assessment tools for the 12 large counties.

TABLE 4: CO			S RESPONSIBL LS FOR THE 12			T PLACEME	NT AND		
County			r determining a and placement nent		A	Assessment Tools			
	County alcohol and other drug agency	Probation department	Drug treatment provider(s)	Other	ASI	ASAM PPC	Other		
Alameda	~		V		<b>V</b>	<b>V</b>			
Contra Costa	~	<b>V</b>	V	<b>V</b>	<b>V</b>		<b>V</b>		
Fresno	~				<b>V</b>		<b>V</b>		
Los Angeles	~	<b>V</b>	V	<b>V</b>	<b>V</b>		<b>V</b>		
Orange	~				<b>V</b>	~	<b>V</b>		
Riverside	~				<b>V</b>	~			
Sacramento	~				<b>V</b>		<b>V</b>		
San Bernadino	~	<b>V</b>	V	<b>V</b>	<b>V</b>				
San Diego		<b>V</b>	V		<b>V</b>		<b>V</b>		
San Francisco	V		V		<b>V</b>	<b>V</b>			
Santa Clara	~					<b>V</b>			
Ventura	<b>V</b>				<b>V</b>	<b>V</b>			
Percent of Total	91.7%	33.3%	_ 50.0% _	25.0%	91.7%	50.0%	50.0%		

#### **B. Fiscal Analysis**

The counties, regardless of size, budgeted for the first year of SACPA implementation, while anticipating needs for the four subsequent years for which the Act is authorized. Subsequently, many counties have budgeted a contingency fund (or "carryover funding") in order to create a flexible reserve that could be spent as the actual impact of SACPA has been realized over time. Because counties were uncertain of actual SACPA caseloads, they planned for the possibility that the actual caseloads might exceed projections. This is a prudent

approach to budgeting where such uncertainty exists. This section discusses carryover funding, budgeting, and services, and activities funding.

#### 1. Funds Planned for Expenditure for FY 2003/04

Table 5 summarizes planned expenditures for the large counties in FY 2003/04. The amount of available funds for FY 2003/04 included the FY 2003/04 State allocation plus any funds unspent from FY 2002/03 (carryover funds). The average percentage of total funds available planned for expenditure in FY 2003/04 by the 12 large counties was 94.1% (range: 67.4% to 115.6%). Five of the 12 large counties planned to spend all (100%) or more of the funds available, while the other seven counties did not plan to expend all available funds

for FY 2003/04.

## For the 12 large counties:

- In FY 2001/02, an average of 76.9% of SACPA funds was planned to be spent on drug treatment-related services.
- In FY 2002/03, an average of 79.4% of SACPA funds was planned to be spent on drug treatment-related services.
- In FY 2003/04, an average of 75.9% of SACPA funds was planned to be spent on drug treatment-related services.
- For FY 2001/02, an average of 23.1% of SACPA funds was planned to be spent on probation, supervision, court monitoring, and other related activities.
- For FY 2002/03, an average of 20.6% of SACPA funds was planned to be spent on probation, supervision, court monitoring, and other related activities.
- For FY 2003/04, an average of 24.1% was planned to be spent on probation, supervision, court monitoring, and other related services.

Table 5: Planned Expenditures in FY 2003/04 as Reported by Each Large County									
County	Carryover from FY 2002/03	FY 2003/04 County Allocation	Total Funds Available	Available Funds Planned to be Spent (\$)	Available Funds Planned to be Spent (%)				
Alameda	\$3,394,272	\$5,242,105	\$8,636,377	\$8,636,377	100.0%				
Contra Costa	\$468,139	\$2,945,394	\$3,413,533	\$3,407,271	99.8%				
Fresno	\$1,511,853	\$3,100,976	\$4,612,829	\$5,330,633	115.6%				
Los Angeles	\$9,571,247	\$30,648,559	\$40,219,806	\$40,219,806	100.0%				
Orange	\$1,069,444	\$8,021,622	\$9,091,066	\$9,713,522	106.8%				
Riverside	\$383,730	\$4,366,040	\$4,749,770	\$4,605,066	97.0%				
Sacramento	\$3,741,882	\$4,383,877	\$8,125,759	\$5,473,941	67.4%				
San Bernardino	\$2,232,628	\$5,672,721	\$7,905,349	\$6,626,078	83.8%				
San Diego	\$2,032,190	\$8,926,545	\$10,958,735	\$10,958,735	100.0%				
San Francisco	\$4,604,211	\$4,142,419	\$8,746,630	\$6,514,217	74.5%				
Santa Clara	\$1,168,896	\$4,564,866	\$5,733,762	\$5,338,052	93.1%				
Ventura	\$780,000	\$2,762,667	\$3,542,667	\$3,234,835	91.3%				
12-County Mean	\$2,579,874	\$7,064,816	\$9,732,418	\$9,171,544	94.1%				

#### 2. Services and Activities

This section discusses the various services or activities that were planned to be provided by the 12 large counties, including drug treatment and additional services (vocational training, literacy training, family counseling, etc.), and criminal justice activities (supervision and monitoring). Table 6 summarizes the percentage of funds planned to be spent for services and criminal justice activities for FY 2003/04 for these 12 counties.

Table 6: Percentage of Funds Planned to be Spent for Drug Treatment and Other Services and Criminal Justice Activities for the 12 Large Counties for FY 2003/04									
County	Total Amount of Funds Planned to be Spent	Percentage Planned for Services	Percentage Planned for Criminal Justice Activities						
Alameda	\$8,636,377	83.8%	16.2%						
Contra Costa	\$3,407,271	67.2%	32.8%						
Fresno	\$5,330,633	76.1%	23.9%						
Los Angeles	\$40,219,806	85.3%	14.7%						
Orange	\$9,713,522	78.8%	21.2%						
Riverside	\$4,605,066	78.7%	21.3%						
Sacramento	\$5,473,941	68.5%	31.5%						
San Bernardino	\$6,626,078	61.7%	38.3%						
San Diego	\$10,958,735	79.2%	20.8%						
San Francisco	\$6,514,217	80.0%	20.0%						
Santa Clara	\$5,338,052	73.1%	26.9%						
Ventura	\$3,234,835	78.6%	21.4%						
_12-County Mean	\$9,171,544	<b>75.9</b> %	<b> 24.1</b> %						

#### a) Services

This category combines drug treatment and related services (i.e., literacy training, vocational training, family counseling, etc.) that can be provided by the counties under SACPA. In FY 2003/04, the average percentage of funds planned for expenditure on drug treatment and related services by these 12 counties was 75.9% (range: 61.7% to 85.3%). In comparison, during FY 2002/03 the average amount planned to be spent on drug treatment-related services by these 12 counties was 79.4%.

#### b) Criminal Justice

This category includes funding for probation, supervision, monitoring, and other related activities. In FY 2003/04, the average percentage of funds planned to be spent in FY 2003/04 on criminal justice activities by the 12 large counties was 24.1% (range:

14.7% to 38.3%). In comparison, during FY 2002/03 the average amount planned to be spent on criminal justice activities by these 12 counties was 20.6%.

## 3. Capacity

In FY 2003/04 four (33.3%) of the 12 large counties planned for an capacity increase in non-residential drug treatment, five counties (41.7%) planned for an capacity increase in residential drug treatment. Eight (66.7%) of these 12 counties planned for an increase in total capacity. The planned average percentage increase in total capacity for these 12 counties was 20.1% (range: 0% to 140.7%). Table 7 presents the planned service capacity increases for each county for FY 2002/03. This table lists the anticipated capacity increases in non-residential, residential and total drug-treatment-related services.

#### For the 12 large counties:

- In FY 2001/02, there was a planned 31.2% average capacity increase in non-residential drug treatment, a 33.6% average increase in residential drug treatment, and a 40.2% average increase in drug treatment and other services combined.
- In FY 2002/03, there was a planned 15.7% average capacity increase in non-residential drug treatment, a 39.3% average increase in residential drug treatment, and a 17.7% average increase in drug treatment and other services combined.
- In FY 2003/04 there was a planned 18.0% average capacity increase in non-residential drug treatment, a 114.6% average capacity increase in residential drug treatment and a 20.1% total average capacity increase.

TABLE 7: PERCENTAGE OF PLANNED CAPACITY INCREASE OF NON-RESIDENTIAL AND RESIDENTIAL DRUG TREATMENT, AND ALL DRUG TREATMENT – RELATED SERVICES FOR THE 12 LARGE COUNTIES FOR FY 2003/04

Country		ity increase in		Capacit	y increase in drug treatme		Tota	l capacity inc	rease
County	Existing	Planned Additional	% increase	Existing	Planned Additional	% increase	Existing	Planned Additional	% increase
Alameda	83,744	13,541	16.2%	23,550	2,229	9.5%	107,294	16,284	15.2%
Contra Costa	2,088	0	0.0%	48	0	0.0%	2,223	0	0.0%
Fresno	3,713	0	0.0%	458	0	0.0%	4,871	100	2.1%
Los Angeles	12,021	0	0.0%	4,200	0	0.0%	16,221	0	0.0%
Orange	2,815	2,329	82.7%	451	46	10.2%	3,266	2,395	73.3%
Riverside	2,825	0	0.0%	372	0	0.0%	3,497	0	0.0%
Sacramento	2,964	0	0.0%	166	6	3.6%	4,154	6	0.1%
San Bernadino	1,309	0	0.0%	421	0	0.0%	1,730	150	8.7%
San Diego	1,317	0	0.0%	323	10	3.1%	1,640	10	0.6%
San Francisco	3,852	43	1.1%	528	0	0.0%	4,757	43	0.9%
Santa Clara	389	0	0.0%	28	0	0.0%	501	0	0.0%
Ventura	1,425	1,655	116.1%	29	391	1348.3%	1,454	2,046	140.7%
12-County Mean	9,872	1,464	18.0%	2,548	224	114.6%	12,634	1,753	20.1%

## C. Section Highlights

This section provides highlights of the analysis of the 12 large counties, specifically:

- The average percentage of available funds planned to be spent in FY 2003/04 by the 12 large counties was 94.1% (range: 67.4% to 115.6%).
- The average percentage of total available funds planned to be spent on services (drug treatment and other services) by these 12 counties was 75.9% (range: 61.7% to 85.3%); and the average percentage planned for criminal justice activities was 24.1% (range: 14.7% to 38.3%).
- All (100.0%) of the 12 large counties carried over funds into FY 2003/04.
- The 12 large counties estimated that 43,797 referrals would be made for SACPA services during FY 2003/04. A majority of these referrals would come from the court/probation system.
- Eleven of the 12 large counties planned to expend funds for drug testing of SACPA clients. San Francisco county plans to conduct random drug testing, but not all clients will be required to be tested.
- All (100.0%) of the 12 large counties stated that "impacted community parties" were involved in the SACPA planning process. Six (50.0%) said that "clients/client groups" were also involved in the planning process.
- Eleven (91.7%) of the 12 county plans indicated that the county alcohol and other drug agency would be responsible for the assessment and placement of SACPA-eligible clients, and six (50.0%) stated that multiple entities would provide these services.

#### IV. Analysis of the Plans for the Nine Medium Counties

This section provides an analysis of plans from the nine medium counties as categorized by CADPAAC. These counties are: Kern, Monterey, San Joaquin, San Mateo, Santa Barbara, Solano, Sonoma, Stanislaus, and Tulare. The combined population of these counties is 4.6 million or approximately 13.0% of the State's total population. The total amount of SACPA funds available to the nine medium counties for FY 2003/04 is \$24,354,659, which is 14.8% of the total SACPA funds available (\$164,938,079) for the counties. The total funds available in FY 2003/04 include funds carried over from FY 2002/03. The following analyses are similar to those done for the 12 large counties.

## **A. Programmatic Analysis**

The following sections summarize the information required by SACPA regulations to be in the programmatic section of the county plans.

#### 1. Lead Agency

Five (55.6%) of the nine medium counties designated the behavioral health or alcohol and drug services agency/division as the lead agency responsible for implementing SACPA-related activities. Two designated the health agency as

For the nine medium counties

- In FY 2001/02 and FY 2002/03, seven (77.8%) of the medium counties designated their behavioral health or alcohol and drug services agency/division as the lead agency for coordinating SACPA services.
- During FY 2003/04, five (55.6%) of these counties designated their behavioral health or alcohol and drug services agency/division as the lead agency for coordinating SACPA services. Two (22.2%) designated the health and human services agency as the lead, and one designated the probation department.

lead, one designated the probation department, and one designated the mental health agency. See Table 8.

Table 8: Plan Elements for the 9 Medium Counties										
County	Lead Agency	Lead Agency Community Clients Parties		Indian Tribes	Drug Test					
Kern	Health (MH)	Yes	No	Not mentioned	Yes					
Monterey	Health	Yes	Not mentioned	Not mentioned	Yes					
San Joaquin	Health (A&D)	Yes	Yes	No	Yes					
San Mateo	Health (A&D)	Yes	Not mentioned	Not mentioned	Yes					
Santa Barbara	Health (A&D)	Yes	Yes	Yes	Yes					
Solano	Probation	Yes	Yes	Not mentioned	Yes					
Sonoma	Health (A&D)	Yes	Not mentioned	Not mentioned	Yes					
Stanislaus	Health (BH)	Yes	Not mentioned	Not mentioned	Yes					
Tulare	Health	Yes	Yes	Yes	Yes					

#### 2. Planning Process

All of the nine medium county plans indicated that "impacted community parties" were involved in the planning process. The entities varied across counties. Four (44.4%) of the county plans stated specifically that "clients/client groups" were involved in planning and two (22.2%) of the nine medium county plans indicated that there were federally recognized

American Indian tribes in the county, and that these tribes were part of the SACPA planning

process. See Table 8.

## 3. Drug Testing

For FY 2003/04, all nine of the medium counties planned to fund drug testing of SACPAeligible clients. See Table 8.

#### 4. Types of Services

Table A2 in Appendix A lists the types of services and activities anticipated to be provided in FY 2003/04 to SACPA-eligible clients in the nine medium counties, using each of the 19 sub-categories of services that have been identified by ADP.

## 5. Client Population (Parole and Probation)

The nine medium counties plan that a total of 9,816 referrals will be made to SACPA services during FY 2003/04. See Table 9 for estimates by county of referrals (number and percentage of total) from either the court/probation or parole system, as well as the total number of referrals estimated for FY 2003/04.

## For the nine medium counties:

- Between FY 2001/02 and FY 2002/03, the planned parole and court/probation referrals for SACPA services decreased by 12.5% (from 15,463 to 13,530). Between FY 2002/03 and 2003/04. the medium counties were planning a 37.5% decrease in such referrals (from 13, 530 to 9,816).
- In comparing the FY 2001/02 and 2002/03 county plans, five of the nine medium counties planned for a decrease in the number of projected referrals, three planned for an increase, and one planned no change. Between FY 2002/03 and FY 2003/04, four (44.4%) of the counties planned for a decrease in referrals, while five were anticipating an increase.

Table 9: Estimated Referrals (number and percentage) by Source for the Nine Medium										
Counties for FY 2003/04										
County Name		ds from Probation	Referrals f	rom Parole	Total Estimated					
	Number	%	Number	%	Number of Referrals					
Kern	2,000	90.9%	200	9.1%	2,200					
Monterey	440	88.0%	60	12.0%	500					
San Joaquin	1,050	87.0%	157	13.0%	1,207					
San Mateo	1,129	87.7%	159	12.3%	1,288					
Santa Barbara	825	97.6%	20	2.4%	845					
Solano	475	86.4%	75	13.6%	550					
Sonoma	480	90.6%	50	9.4%	530					
Stanislaus	665	89.3%	80	10.7%	745					
Tulare	1,903	97.5%	48	2.5%	1,951					
9-County Total	8,967		849		9,816					
9-County Mean	996	90.5%	94	9.5%	1,091					

#### 6. Assessment and Placement

All of the nine medium counties said that county alcohol and other drug agency would be involved with the assessment and placement of SACPA-eligible clients. Six (66.7%) of these counties stated that multiple entities (e.g., alcohol/drug treatment agency, probation, courts) would be responsible for assessment and placement. Seven (77.8%) of the nine medium counties planned to use the ASI as one of the assessment tools. Five (55.6%) of the counties stated that the ASAM PPC would be one of the assessment tools for SACPA-eligible clients. Six (66.7%) of the counties stated that other assessment tools would be used also. See Table 10 for comparison of the entities responsible for SACPA client placement and assessment tools for the 9 medium counties.

Table 10: Com	parison of th					cement and A	ssessment	
		Tools for the 9 Medium Counties  Entity(ies) responsible for determining a SACPA client's level of need for and placement in drug treatment  Assessment Tools						
County	County alcohol and other drug agency	Probation department	Drug treatment provider(s)	Other	ASI	ASAM PPC	Other	
Kern	V				<b>V</b>	V	<b>V</b>	
Monterey	V		V		<b>V</b>			
San Joaquin	<b>V</b>	<b>'</b>			~	<b>✓</b>		
San Mateo	<b>✓</b>	<b>'</b>	<b>'</b>	<b>&gt;</b>	<b>/</b>	V	<b>✓</b>	
Santa Barbara	<b>✓</b>			<b>✓</b>	~			
Solano	<b>✓</b>				~		<b>✓</b>	
Sonoma	<b>V</b>	<b>'</b>				<b>✓</b>	<b>✓</b>	
Stanislaus	V	<b>'</b>	<b>'</b>	~	~	<b>✓</b>	~	
Tulare	V						<b>V</b>	
Percent of Total	100.0%	44.4%	33.3%	33.3%	77.8%	55.6%	55.6%	

## **B. Fiscal Analysis**

## 1. Funds Planned for Expenditure for FY 2003/04

The amount of available funds for FY 2003/04 includes the FY 2003/04 State allocation plus any funds unspent from FY 2002/03 (carryover funds). The average percentage of funds planned for expenditure in FY 2003/04 by the nine medium counties was 81.4% (range: 56.7% to 107.4%). Two of the nine medium counties planned to spend all or more of the

funds available. In comparison, one of these nine counties planned to spend all available funds in FY 2002/03. Seven counties did not plan to expend all available funds for FY 2003/04. The range of percentage of funds planned to be spent by these five counties was from 56.7% to 99.7% of total available funds. Table 11 summarizes the percentage of available funds in FY 2003/04 planned to be spent by each county.

For the nine medium counties:

- In FY 200/02, the average percentage of available funds planned to be spent was 59.8% (range: 26.2% to 100.0%).
- For FY 2002/03, the average percentage of available funds planned to be spent was 88.0% (range: 56.8% to 127.3%).
- For FY 2003/04, the average percentage of available funds planned to be spent, was 81.4% (range: 56.7% to 107.4%).

TABLE 11: FUND	S PLANNED TO BE	SPENT IN FY 20	03/04 AS <b>R</b> EPORT	ГЕД ВҮ <b>Е</b> АСН <b>М</b> ЕІ	DIUM COUNTY
County	Carryover from FY 2002/03	FY 2003/04 County Allocation	Total Funds Available	Available Funds Planned to be Spent (\$)	Available Funds Planned to be Spent (%)
Kern	\$1,699,985	\$2,543,497	\$4,243,482	\$2,878,497	67.8%
Monterey	\$1,377,383	\$1,176,306	\$2,553,689	\$1,666,955	65.3%
San Joaquin	\$1,378,296	\$1,943,771	\$3,322,067	\$3,312,695	99.7%
San Mateo	\$493,409	\$1,933,400	\$2,426,809	\$2,606,400	107.4%
Santa Barbara	\$1,015,382	\$1,968,384	\$2,983,766	\$1,968,384	66.0%
Solano	\$1,377,327	\$1,421,891	\$2,799,218	\$1,587,580	56.7%
Sonoma	\$1,260,293	\$1,687,180	\$2,947,473	\$2,068,825	70.2%
Stanislaus	\$0	\$1,520,618	\$1,520,618	\$1,520,618	100.0%
Tulare	\$1,276	\$1,556,261	\$1,557,537	\$1,556,261	99.9%
9-County Mean	\$955,928	\$1,750,145	\$2,706,073	\$2,129,579	81.4%

#### 2. Services and Activities

This section discusses the various services or activities that were planned to be provided by the nine medium counties, including drug treatment and related services (vocational training, literacy training, family counseling, etc.), and criminal justice activities (supervision and monitoring). Table 12 summarizes the percentages of funds planned to be spent for treatment-related services and criminal justice activities for FY 2003/04 for these nine counties.

TABLE 12: PERCENTAGE OF FUNDS PLANNED TO BE SPENT FOR DRUG TREATMENT AND OTHER SERVICES AND CRIMINAL JUSTICE ACTIVITIES FOR THE NINE MEDIUM COUNTIES FOR FY 2003/04

County	Total Amount of Funds Planned to be Spent	Percentage Planned for Services	Percentage Planned for Criminal Justice Activities
Kern	\$2,878,497	74.1%	25.9%
Monterey	\$1,666,955	79.3%	20.7%
San Joaquin	\$3,312,695	86.4%	13.6%
San Mateo	\$2,606,400	85.5%	14.5%
Santa Barbara	\$1,968,384	74.2%	25.8%
Solano	\$1,587,580	71.2%	28.8%
Sonoma	\$2,068,825	79.7%	20.3%
Stanislaus	\$1,520,618	83.0%	17.0%
Tulare	\$1,556,261	78.3%	21.7%
_9-County Mean	\$2,129,579		20.9%

#### a) Services

This category combines drug treatment and other services (i.e., literacy training, vocational training, family counseling, etc.) that will be provided by the counties under SACPA. In FY 2003/04, the average percentage of funds planned for expenditure on drug treatment and other services by these nine counties was 79.1% (range: 71.2% to 86.4%). In comparison, during FY 2002/03 the average amount planned to be spent on services by these nine counties was 82.3%.

#### b) Criminal Justice

For the nine medium counties:

- In FY 2001/02, an average of 84.3% of SACPA funds was planned to be spent on drug treatment-related services.
- In FY 2002/03, an average of 82.3% of SACPA funds was planned for drug treatment-related services.
- In FY 2003/04, an average of 78.9% of SACPA funds was planned for drug treatment-related services.
- For FY 2001/02, an average of 15.8% of SACPA funds was planned to be spent on probation, supervision, monitoring and other related activities.
- For FY 2002/03, an average of 17.7% of SACPA funds was planned for criminal justice services.
- For FY 2003/04, an average of 20.9% of SACPA funds was planned for criminal justice services.

This category includes funding for probation, supervision, monitoring, and other related activities. In FY 2003/04, the average amount of funds planned to be spent on criminal justice activities by the nine medium counties was 20.9% (range: 13.6% to

28.8%). In comparison, during FY 2002/03 the average amount planned to be spent on criminal justice activities by these nine counties was 17.7%.

## 3. Capacity

In FY 2003/04 four (44.4%) of the 9 medium counties planned for a capacity increase in non-residential drug treatment, and five counties (55.6%) plan for an capacity increase in residential drug treatment. Five (55.6%) of these 9 counties planned for an increase in total capacity. The planned average increase in total capacity for these 9 counties was 20.6% (range: 0% to 125.4%). Table 13 presents the anticipated service capacity increases for each county. This table lists the anticipated capacity increases in non-residential and residential drug treatment and the total drug treatment-related services.

TABLE 13: PE									
TREATMENT, A	AND ALL <b>D</b>	RUG TREAT				COUNTY I	FOR THE 9	MEDIUM C	OUNTIES
			F	or <b>FY 20</b>	03/04				
County		city increase i ntial drug tre			increase in r drug treatme		Tota	al capacity in	crease
County	Existing	Planned Additional	% increase	Existing	Planned Additional	% increase	Existing	Planned Additional	% increase
Kern	1,176	1,247	106.0%	22	15	68.2%	1,198	1,502	125.4%
Monterey	765	0	0.0%	104	46	44.2%	869	46	5.3%
San Joaquin	920	130	14.1%	140	35	25.0%	1,294	213	16.5%
San Mateo	708	268	37.9%	228	36	15.8%	1,186	304	25.6%
Santa Barbara	2,443	40	1.6%	28	2	7.1%	2,721	332	12.2%
Solano	220	0	0.0%	80	0	0.0%	300	0	0.0%
Sonoma	273	0	0.0%	23	0	0.0%	609	0	0.0%

## C. Section Highlights

832

670

8.007

890

Stanislaus

9-County Total

9-County Mean

Tulare

This section provides highlights of the analysis of the nine medium counties, specifically:

138

102

865

96

0

0

**134** 

15

0.0%

0.0%

17.8%

970

772

9,919

1.102

0

0

2,397

266

0.0%

0.0%

20.6%

- The average percentage of available funds planned for expenditure in FY 2003/04 by the nine medium counties was 81.4% (range: 56.7% to 107.4%).
- The average percentage of total funds available planned to be spent on services (drug treatment and other services) by these nine medium counties was 79.1% (range: 71.2% to

0

0

1,685

187

0.0%

0.0%

17.7%

86.4%); and the average percentage planned for criminal justice activities was 20.9% (range: 13.6% to 28.8%).

- Eight (88.9%) of the nine-medium counties carried over funds into FY 2003/04.
- The nine medium counties estimated that 9,816 referrals would be made for SACPA services during FY 2003/04. A majority of these referrals would come from the court/probation system.
- Five (55.6%) of the nine medium county plans projected an increase in total capacity of services during FY 2003/04. The average increase in total capacity for these nine counties was 20.6 %.
- All of the nine medium counties planned to expend funds for drug testing of SACPA clients.
- All (100.0%) of the nine medium counties stated that "impacted community parties" were involved in the SACPA planning process. Four (44.4%) said that "clients/client groups" were also involved in the planning process.
- Two (22.2%) of the nine county plans indicated that there were federally recognized American Indian tribes in the county, and that these tribes were part of the SACPA planning process.

#### IV. Analysis of the Plans for the 37 Small Counties

This section of the document provides an analysis of the remaining 37 counties, categorized as small by CADPAAC<sup>5</sup>. The combined population of these 37 counties is 3.6 million or approximately 10.0% of the state's total population. The total amount of funds available for the 37 counties for FY 2003/04 is \$24,847,137 or 15.1% of the total SACPA funds available (\$164,938,079) for the year. The total FY 2003/04 allocation to these counties includes funds carried over from FY 2003/04.

#### 1. Programmatic Analysis

The following sections summarize the programmatic information required by SACPA regulations to be in the county plans.

<sup>&</sup>lt;sup>5</sup> See Table 14 for a list of small counties.

## 1. Lead Agency

Thirty-two (86.5%) of the 37 small counties designated their behavioral health or alcohol and drug services agency/division as the lead agency responsible for implementing SACPA-related activities. Four (10.8%) of these 37 counties designated the public health or health services agencies and one designated the mental health agency as the lead agency. In comparison, 33 (89.2%) of the small counties designated the behavioral health or alcohol and drug services agency/division as the lead agency in FY 2002/03. See Table 14.

- In FY 2002/03, 33 (89.2%) of the 37 small counties designated their behavioral health or alcohol and drug services agency/division as the lead agency responsible for implementing SACPA services.
- In FY 2001/02, 25 (67.6%) of the small counties designated the behavioral health or alcohol and drug services agency/division as the lead agency.
- In FY 2003/04 32 (86.5%) of the small counties designated the behavioral health or alcohol and drug services agency/division as the lead agency.

## 2. Planning Process

Twenty-seven (73.0%) of these county plans indicated that "impacted community parties" were involved in the planning process. The entities varied across counties. Eleven (28.2%) of the county plans stated specifically that "clients/client groups" were involved. Twenty-three (62.2%) of the county plans indicated that there were federally recognized American Indian tribes in the county, and that these tribes were part of the SACPA planning process. See Table 14.

#### 3. Drug Testing

For FY 2003/04, all (100.0%) of the 37 small counties planned to fund drug testing of SACPA-eligible clients. See Table 14.

	Table 14: Pla	N ELEMENTS FO	R THE 37 SMALL	Counties	
County	Lead Agency	Impacted Community Parties	Clients	Indian Tribes	Drug Test
Alpine	Health (BH)	Not mentioned	Not mentioned	Yes	Yes
Amador	Health (A&D)	No	Not mentioned	Not mentioned	Yes
Butte	Health (A&D)	No	No	Yes	Yes
Calaveras	Health (BH)	No	No	No	Yes
Colusa	Health (A&D)	Not mentioned	No	Yes	Yes
Del Norte	Health (MH, A&D)	Not mentioned	No	Yes	Yes
El Dorado	Health (A&D)	Yes	Yes	Yes	Yes
Glenn	Health	Yes	No	Yes	Yes
Humboldt	Health	Yes	No	Yes	Yes
Imperial	Health (BH)	Yes	Not mentioned	Yes	Yes
Inyo	Health (A&D)	NA	Yes	Yes	Yes
Kings	Health (A&D)	Not mentioned	No	Not mentioned	Yes
Lake	Health (A&D) Not m  Health (A&D)		No	Yes	Yes
Lassen	Health (A&D)	Yes	No	Yes	Yes
Madera	Health (MH)	Yes	Not mentioned	Yes	Yes
Marin	Health (A&D)	Yes	Not mentioned	Not mentioned	Yes
Mariposa	Health (A&D)	Yes	Yes	NT	Yes
Mendocino	Health (A&D)	Yes	Not mentioned	Yes	Yes
Merced	Health (A&D)	Yes	Not mentioned	Yes	Yes
Modoc	Health (A&D)	Yes	Yes	Yes	Yes
Mono	Health (A&D)	Yes	Yes	Yes	Yes
Napa	Health (A&D)	Yes	No	Not mentioned	Yes
Nevada	Health (A&D)	Not mentioned	Yes	Not mentioned	Yes
Placer	Health	Yes	Yes	Yes	Yes
Plumas	Health (A&D)	Yes	Yes	Yes	Yes
San Benito	Health (A&D)	Yes	Yes	NT	Yes
San Luis Obispo	Health (A&D)	Yes	Yes	Not mentioned	Yes
Santa Cruz	Health (A&D)	Yes	Not mentioned	Not mentioned	Yes
Shasta	Health (A&D)	Yes	Not mentioned	Yes	Yes
Sierra	Health (A&D)	Yes	Not mentioned	Not mentioned	Yes
Siskiyou	Health (BH)	Yes	Yes	Yes	Yes
Sutter	Health (A&D)	Yes	Not mentioned	Not mentioned	Yes
Tehama	Health (A&D)	Yes	No	Yes	Yes
Trinity	Health (BH)	Yes	No	NT	Yes
Tuolumne	Health (BH)	Yes	No	Yes	Yes
Yolo	Health (A&D)	Yes	Not mentioned	Yes	Yes
Yuba	Health	NA	No	NT	Yes

## 4. Types of Services

All of the 37 small counties described the specific services that are to be funded and provided under SACPA. Table A3 in Appendix A lists the types of services and activities anticipated to be provided to SACPA-eligible clients in the 37 small counties, using each of the 19 sub-categories of services that have been identified by ADP.

## 5. Client Population (Probation and Parole)

The 37 small counties have estimated that a total of 7,282 referrals will be made to SACPA services during FY 2003/04. See Table 15 for

#### For the 37 small counties:

- Between FY 2001/02 and
   FY 2002/03, the estimates of parole
   and court/probation referrals for
   SACPA services decreased by 21.5%
   (from 9,186 to 7,207 referrals).
   Twenty-one counties estimated a
   decrease in the projected number of
   referrals, seven estimated an increase
   in referrals, and nine estimated no
   change.
- Between FY 2002/03 and FY 2003/04, the estimated parole and court/probation referrals for SACPA decreased by 1.0% (from 7,207 to 7,282). Eleven counties estimated a decrease in the projected number of referrals, 17 counties estimated an increase and nine estimated no change.

estimates by county of referrals (number and percentage of total) from either the court/probation or parole system, as well as the total number of referrals estimated for FY 2003/04.

#### 6. Assessment and Placement

Thirty-four (91.9%) of the 37 small counties said that the county alcohol and other drug agency would be involved with the assessment and placement of SACPA-eligible clients.

Twenty-four (64.9%) of these 37 counties stated that multiple entities (e.g., alcohol/drug treatment agency, probation, and courts) would be responsible for the assessment and placement process, indicating a team approach. Thirty-two (86.5%) of these 37 counties planned to use the ASI as one of the assessment tools. Twenty-six (70.3%) of these 37 counties stated that the ASAM PPC would be one of the assessment tools for SACPA-eligible clients. Thirteen (35.1%) said other assessment tools would also be used. See Table 16 for comparison of the entities responsible for SACPA client placement and assessment tools for the 37 small counties.

TABLE 15: ESTIMATED REFERRALS (NUMBER AND PERCENTAGE) BY SOURCE FOR THE 37 SMALL COUNTIES FOR FY 2003/04

County		rals from Probation	Referrals	from Parole	Total Estimated Number of Referrals				
	Number	%	Number	%					
Alpine	6	100.0%	0	0.0%	6				
Amador	35	87.5%	5	12.5%	40				
Butte	476	81.4%	109	18.6%	585				
Calaveras	75	96.2%	3	3.8%	78				
Colusa	35	70.0%	15	30.0%	50				
Del Norte	38	95.0%	2	5.0%	40				
El Dorado	220	89.8%	25	10.2%	245				
Glenn	110	91.7%	10	8.3%	120				
Humboldt	270	93.1%	20	6.9%	290				
Imperial	250	92.6%	20	7.4%	270				
Inyo	28	93.3%	2	6.7%	30				
Kings	300	85.7%	50	14.3%	350				
Lake	310	93.9%	20	6.1%	330				
Lassen	60	87.0%	9	13.0%	69				
Madera	90	36.0%	160	64.0%	250				
Marin	132	90.4%	14	9.6%	146				
Mariposa	34	100.0%	0	0.0%	34				
Mendocino	223	95.7%	10	4.3%	233				
Merced	320	80.0%	80	20.0%	400				
Modoc	20	95.2%	1	4.8%	21				
Mono	26	86.7%	4	13.3%	30				
Napa	505	98.4%	8	1.6%	513				
Nevada	180	90.0%	20	10.0%	200				
Placer	300	92.3%	25	7.7%	325				
Plumas	25	92.6%	2	7.4%	27				
San Benito	80	85.1%	14	14.9%	94				
San Luis Obispo	400	88.9%	50	11.1%	450				
Santa Cruz	370	90.0%	41	10.0%	411				
Shasta	350	85.4%	60	14.6%	410				
Sierra	12	70.6%	5	29.4%	17				
Siskiyou	80	88.9%	10	11.1%	90				
Sutter	220	71.0%	90	29.0%	310				
Tehama	112	70.0%	48	30.0%	160				
Trinity	100	96.2%	4	3.8%	104				
Tuolumne	188	94.0%	12	6.0%	200				
Yolo	183	89.7%	21	10.3%	204				
Yuba	128	85.3%	22	14.7%	150				
37-County Total	6,291		991		7,282				
37-County Mean	170	87.3%	27	12.7%	197				

## TABLE 16: COMPARISON OF THE ENTITIES RESPONSIBLE FOR SACPA CLIENT PLACEMENT AND ASSESSMENT TOOLS FOR THE 37 SMALL COUNTIES

			etermining a SA ement in drug		Assessment Tools					
County	County alcohol and other drug agency	Probation department	Drug treatment provider(s)	Other	ASI	ASAM PPC	Other			
Alpine	V	V			<b>V</b>	~	V			
Amador	V	V	~		<b>V</b>		V			
Butte	V				<b>V</b>	~	V			
Calaveras	V				<b>V</b>					
Colusa	V	V			<b>V</b>	~				
Del Norte	<b>V</b>	V			<b>V</b>	V				
El Dorado	~	~	<b>'</b>		<b>V</b>	~	<b>/</b>			
Glenn	~				<b>V</b>	~	<b>/</b>			
Humboldt	~	~				~				
Imperial	~	~				~	<b>/</b>			
Inyo	V	V			<b>V</b>					
Kings			~	V	<b>V</b>	V				
Lake	V				<b>V</b>	V				
Lassen	V	~			<b>V</b>	V				
Madera	V		~		<b>V</b>					
Marin		~	~	V	<b>V</b>	V				
Mariposa		~	~		<b>V</b>	V				
Mendocino	V				<b>V</b>	V				
Merced	V	~			<b>V</b>	~				
Modoc	V	~	~	V	<b>V</b>	V	<b>V</b>			
Mono	V				<b>V</b>					
Napa	V		~		<b>V</b>	V				
Nevada	V		~		<b>V</b>					
Placer	V	~					<b>V</b>			
Plumas	V					V	<b>V</b>			
San Benito	V	~	~		<b>V</b>	~				
San Luis Obispo	V				<b>V</b>	~	<b>V</b>			
Santa Cruz	~	~			V	~				
Shasta	~				V					
Sierra	~	~			V	~				
Siskiyou	~	~			V		<b>V</b>			
Sutter	~				V	~	<b>V</b>			
Tehama	~				<b>V</b>	~				
Trinity	~					~	<b>V</b>			
Tuolumne	~				<b>V</b>					
Yolo	V	~	<i>'</i>	<b>V</b>	<i>V</i>	~				
Yuba	V	V	V	~						

## **B. Fiscal Analysis**

## 1. Funds Planned for Expenditure for FY 2003/04

The amount of available funds for FY 2003/04 includes the FY 2002/03 allocation for this fiscal year plus any funds unspent from FY 2002/03 (carryover funds). The average percentage of available funds planned for expenditure in FY 2003/04 by the 37 small counties was 85.7% (range: 14.9% to 100.3%). Fifteen (40.5%) of the 37

#### For the 37 small counties:

- The average percentage of available funds planned to be spent from the FY 2001/02 allocation was 59.1% (range: 5.1% to 100.0%).
- For FY 2002/03, the average percentage of available funds planned to be spent was 84.9% (range: 24.3% to 100.0%).
- For FY 2003/04, the average percentage of available funds planned to be spent was 85.7% (range: 14.9% to 100.3%).

small counties planned to expend all or more of the funds available, while 22 counties did not plan to expend all available funds for FY 2003/04. The range of funds planned to be spent by these 13 counties is between 14.9% and 99.8% of total available funds. Table 17 summarizes

the percentage of available funds in FY 2003/04 planned to be spent by each county.

#### 2. Services and Activities

This section discusses the various services or activities that will be provided by the 37 small counties, including drug treatment and related services (vocational training, literacy training, family counseling, etc.), and criminal justice activities (supervision and monitoring). Table 18 summarizes the percentages of funds planned to be spent for drug treatment-related services and criminal justice activities for FY 2003/04 for these 37 counties.

#### a) Services

This category combines drug treatment and related services (i.e., literacy training,

#### For the 37 small counties:

- In FY 2001/02, an average of 80.3% of SACPA funds was planned for drug treatment-related services.
- In FY 2002/03, an average of 77.6% of SACPA funds was planned for drug treatment-related services.
- In FY 2003/04, an average of 75.7% of SACPA funds is planned for drug treatment-related services.
- For FY 2001/02, an average of 19.7% of SACPA funds was planned to be spent on probation, supervision, monitoring and other related activities.
- For FY 2002/03, an average of 22.4% of SACPA funds was planned to be spent on probation, supervision, monitoring and other related activities.
- For FY 2003/04, an average of 23.8% of SACPA funds was planned to be spent on probation, supervision, monitoring and other related activities.

TABLE 17: FUN	DS PLANNED TO	BE SPENT IN FY	2003/04 AS REPO	ORTED BY EACH S	MALL COUNTY
County	Carryover from FY 2002/03	FY 2003/04 County Allocation	Total Funds Available	Available Funds Planned to be Spent (\$)	Available Funds Planned to be Spent (%)
Alpine	\$360,000	\$153,534	\$513,534	\$76,306	14.9%
Amador	\$300,000	\$246,098	\$546,098	\$334,424	61.2%
Butte	\$357,735	\$847,826	\$1,205,561	\$1,205,561	100.0%
Calaveras	\$180,000	\$288,347	\$468,347	\$467,605	99.8%
Colusa	\$281,710	\$223,525	\$505,235	\$505,235	100.0%
Del Norte	\$518,225	\$236,471	\$754,696	\$160,025	21.2%
El Dorado	\$0	\$577,713	\$577,713	\$577,713	100.0%
Glenn	\$187,163	\$281,876	\$469,039	\$469,039	100.0%
Humboldt	\$176,262	\$503,168	\$679,430	\$592,027	87.1%
Imperial	\$288,345	\$743,917	\$1,032,262	\$787,583	76.3%
Inyo	\$311,873	\$207,262	\$519,135	\$174,728	33.7%
Kings	\$60,692	\$515,899	\$576,591	\$576,591	100.0%
Lake	\$125,000	\$409,131	\$534,131	\$534,131	100.0%
Lassen	\$171,871	\$264,332	\$436,203	\$333,730	76.5%
Madera	\$275,769	\$509,219	\$784,988	\$700,040	89.2%
Marin	\$601,734	\$784,144	\$1,385,878	\$1,004,453	72.5%
Mariposa	\$0	\$209,915	\$209,915	\$209,915	100.0%
Mendocino	\$309,400	\$528,199	\$837,599	\$837,599	100.0%
Merced	\$253,657	\$791,416	\$1,045,073	\$1,045,073	100.0%
Modoc	\$250,350	\$177,177	\$427,527	\$192,000	44.9%
Mono	\$41,595	\$197,985	\$239,580	\$216,634	90.4%
Napa	\$673,000	\$504,509	\$1,177,509	\$724,262	61.5%
Nevada	\$248,585	\$362,057	\$610,642	\$610,642	100.0%
Placer	\$412,755	\$923,062	\$1,335,817	\$1,290,721	96.6%
Plumas	\$148,486	\$250,060	\$398,546	\$387,469	97.2%
San Benito	\$235,283	\$272,555	\$507,838	\$376,600	74.2%
San Luis Obispo	\$98,978	\$824,124	\$923,102	\$926,102	100.3%
Santa Cruz	\$292,188	\$981,043	\$1,273,231	\$1,224,165	96.1%
Shasta	\$141,303	\$652,430	\$793,733	\$754,213	95.0%
Sierra	\$123,094	\$168,500	\$291,594	\$291,594	100.0%
Siskiyou	\$125,542	\$337,805	\$463,347	\$463,347	100.0%
Sutter	\$57,620	\$378,912	\$436,532	\$436,532	100.0%
Tehama	\$145,463	\$361,938	\$507,401	\$459,618	90.6%
Trinity	\$0	\$196,436	\$196,436	\$196,436	100.0%
Tuolumne	\$40,940	\$323,131	\$364,071	\$363,696	99.9%
Yolo	\$421,311	\$842,266	\$1,263,577	\$1,246,074	98.6%
Yuba	\$137,351	\$417,875	\$555,226	\$521,522	93.9%
37-County Mean	\$225,764	\$445,780	\$671,544	\$574,957	85.7%

Table 18: Percentage of Funds Planned to be Spent for Drug Treatment and Other Services and Criminal Justice Activities for the 37 Small Counties for FY 2003/04

County	Carryover from FY 2002/03	FY 2003/04 County Allocation	Total Funds Available
Alpine	\$76,306	63.9%	36.1%
Amador	\$334,424	81.7%	18.3%
Butte	\$1,205,561	64.5%	35.5%
Calaveras	\$467,605	69.0%	31.0%
Colusa	\$505,235	78.9%	21.1%
Del Norte	\$160,025	60.7%	39.3%
El Dorado	\$577,713	71.0%	29.0%
Glenn	\$469,039	88.6%	11.4%
Humboldt	\$592,027	69.9%	30.1%
Imperial	\$787,583	80.1%	19.9%
Inyo	\$174,728	100.0%	0.0%
Kings	\$576,591	65.3%	34.7%
Lake	\$534,131	64.3%	35.7%
Lassen	\$333,730	87.6%	12.4%
Madera	\$700,040	76.8%	23.2%
Marin	\$1,004,453	83.6%	16.4%
Mariposa	\$209,915	64.9%	35.1%
Mendocino	\$837,599	87.1%	12.9%
Merced	\$1,045,073	83.3%	16.7%
Modoc	\$192,000	81.8%	18.2%
Mono	\$216,634	81.1%	18.9%
Napa	\$724,262	90.9%	9.1%
Nevada	\$610,642	61.3%	38.7%
Placer	\$1,290,721	89.4%	10.6%
Plumas	\$387,469	65.3%	34.7%
San Benito	\$376,600	88.1%	11.9%
San Luis Obispo	\$923,102	68.5%	31.5%
Santa Cruz	\$1,224,165	83.9%	16.1%
Shasta	\$754,213	74.6%	25.4%
Sierra	\$291,594	78.6%	21.4%
Siskiyou	\$463,347	89.2%	10.8%
Sutter	\$436,532	62.7%	37.3%
Tehama	\$459,618	78.3%	21.7%
Trinity	\$196,436	62.8%	37.2%
Tuolumne	\$363,696	55.1%	44.9%
Yolo	\$1,246,074	89.0%	11.0%
Yuba	\$521,522	76.0%	24.0%
37-County Mean	\$574,876	76.2%	23.8%

vocational training, family counseling, etc.) were planned to be provided by the counties under SACPA. In FY 2003/04, the average percentage of funds planned to be spent for drug treatment and related services by these 37 counties in FY 2003/04 was 76.2% (range: 60.7% to 100.0%). In comparison, during FY 2002/03, the average amount planned to be spent by these 37 counties was 77.6%.

#### b) Criminal Justice

This category includes funding for probation, supervision, monitoring, and other related activities. In FY 2003/04, the average amount of funds planned to be spent for criminal justice activities by the 37 small counties was 23.8% (range: 0% to 39.3%). In comparison, during FY 2002/03, the average amount planned to be spent by these 37 counties was 22.4%.

#### 3. Capacity

In FY 2003/04 twenty (54.1%) of the 37 small counties planned for a capacity increase in non-residential drug treatment, while 3 counties (8.1%) planned for a capacity decrease in non-residential drug treatment. Nineteen counties (51.4%) planned for a capacity increase in residential drug treatment, while one county (2.7%) planned for a capacity decrease in residential drug treatment. Twenty two (59.5%) of these 37 counties planned for an increase in total capacity (drug treatment and other services), while four (10.5%) planned for a decrease in total capacity. The planned average percentage increase in total capacity for these 37 counties was 50.6% (range: -19.5% to 361.5%). Table 19 presents the anticipated service capacity increases for each county. This table lists the anticipated capacity increases in non-residential and residential drug treatment, and the total drug treatment-related services.

#### C. Section H.ighlights

This section provides highlights of the analysis of the 37 small counties, specifically:

• The average percentage of funds planned for expenditure in FY 2003/04 by the 37 small counties was 85.7% (range: 14.9% to 100.3%).

TABLE 19: PERCENTAGE OF PLANNED INCREASE IN CAPACITY OF NON-RESIDENTIAL AND RESIDENTIAL DRUG TREATMENT, AND ALL DRUG TREATMENT AND OTHER SERVICES BY COUNTY FOR THE 37 SMALL COUNTIES FOR FY 2003/04

County	Capac residen	ity increase in itial drug trea	non- ntment		increase in r drug treatme		Tota	al capacity inc	crease
County	Existing	Planned Additional	% increase	Existing	Planned Additional	% increase	Existing	Planned Additional	% increase
Alpine	27	0	0.0%	21	0	0.0%	66	0	0.0%
Amador	44	78	177.3%	17	21	123.5%	66	119	180.3%
Butte	469	0	0.0%	53	0	0.0%	1,146	0	0.0%
Calaveras	60	20	33.3%	34	5	14.7%	167	25	15.0%
Colusa	21	29	138.1%	2	12	600.0%	23	53	230.4%
Del Norte	25	10	40.0%	5	0	0.0%	30	10	33.3%
El Dorado	175	5	2.9%	30	10	33.3%	313	15	4.8%
Glenn	186	0	0.0%	47	0	0.0%	233	10	4.3%
Humboldt	167	15	9.0%	130	10	7.7%	422	75	17.8%
Imperial	435	0	0.0%	30	5	16.7%	491	5	1.0%
Inyo	20	10	50.0%	6	2	33.3%	114	50	43.9%
Kings	200	115	57.5%	15	20	133.3%	450	-65	-14.4%
Lake	190	0	0.0%	1,460	0	0.0%	2,964	0	0.0%
Lassen	62	0	0.0%	23	0	0.0%	85	0	0.0%
Madera	300	0	0.0%	78	0	0.0%	868	0	0.0%
Marin	322	10	3.1%	59	1	1.7%	381	106	27.8%
Mariposa	22	12	54.5%	9	18	200.0%	50	42	84.0%
Mendocino	90	150	166.7%	4	20	500.0%	94	170	180.9%
Merced	150	0	0.0%	97	0	0.0%	907	0	0.0%
Modoc	120	0	0.0%	5	0	0.0%	150	0	0.0%
Mono	104	-54	-51.9%	14	1	7.1%	118	-23	-19.5%
Napa	218	0	0.0%	11	40	363.6%	813	40	4.9%
Nevada	14	65	464.3%	7	0	0.0%	30	85	283.3%
Placer	148	102	68.9%	62	13	21.0%	210	196	93.3%
Plumas	15	36	240.0%	2	24	1200.0%	26	94	361.5%
San Benito	111	0	0.0%	39	0	0.0%	192	0	0.0%
San Luis Obispo	995	-234	-23.5%	14	0	0.0%	2,349	-184	-7.8%
Santa Cruz	178	-27	-15.2%	80	-21	-26.3%	276	-48	-17.4%
Shasta	535	0	0.0%	21	0	0.0%	556	0	0.0%
Sierra	102	12	11.8%	22	5	22.7%	124	22	17.7%
Siskiyou	58	32	55.2%	18	12	66.7%	76	44	57.9%
Sutter	350	175	50.0%	17	0	0.0%	473	181	38.3%
Tehama	220	0	0.0%	61	0	0.0%	40	0	0.0%
Trinity	116	35	30.2%	44	8	18.2%	174	52	29.9%
Tuolumne	100	188	188.0%	0	0	0.0%	100	188	188.0%
Yolo	203	0	0.0%	168	0	0.0%	471	0	0.0%
Yuba	252	44	17.5%	12	16	133.3%	430	134	31.2%
37-County Mean	184	22	47.8%	73	6	93.8%	430	38	50.6%

- The average percentage of total funds available that were planned to be spent on services (drug treatment and other services) by these 37 counties was 76.2% (range: 60.7% to 100.0%); and the average percentage planned for criminal justice activities was 23.8% (range: 0% to 39.3%).
- Thirty-four (91.9%) of the 37 small counties carried over funds into FY 2003/04.
- The 37 small counties estimated that 7,282 referrals would be made for SACPA services during FY 2003/04. A majority of these referrals would come from the court/probation system.
- All (100.0%) of the 37 small counties planned to expend funds for drug testing of SACPA clients.
- Twenty-two (59.5%) of these 37 counties planned for an increase in total capacity during FY 2003/04, while 4 planned for a decrease in total capacity. The planned average increase in total capacity for these 37 counties was 50.6% (range: -19.5% to 361.5%).
- Twenty-seven (73.0%) of the 37 small counties stated that "impacted community parties" were involved in the SACPA planning process. Eleven (30.0%) said specifically that "clients/client groups" were involved in the planning process.
- Twenty-three (62.2%) of the 37 county plans indicated that there were federally recognized American Indian tribes in the county, and that these tribes were part of the SACPA planning process.

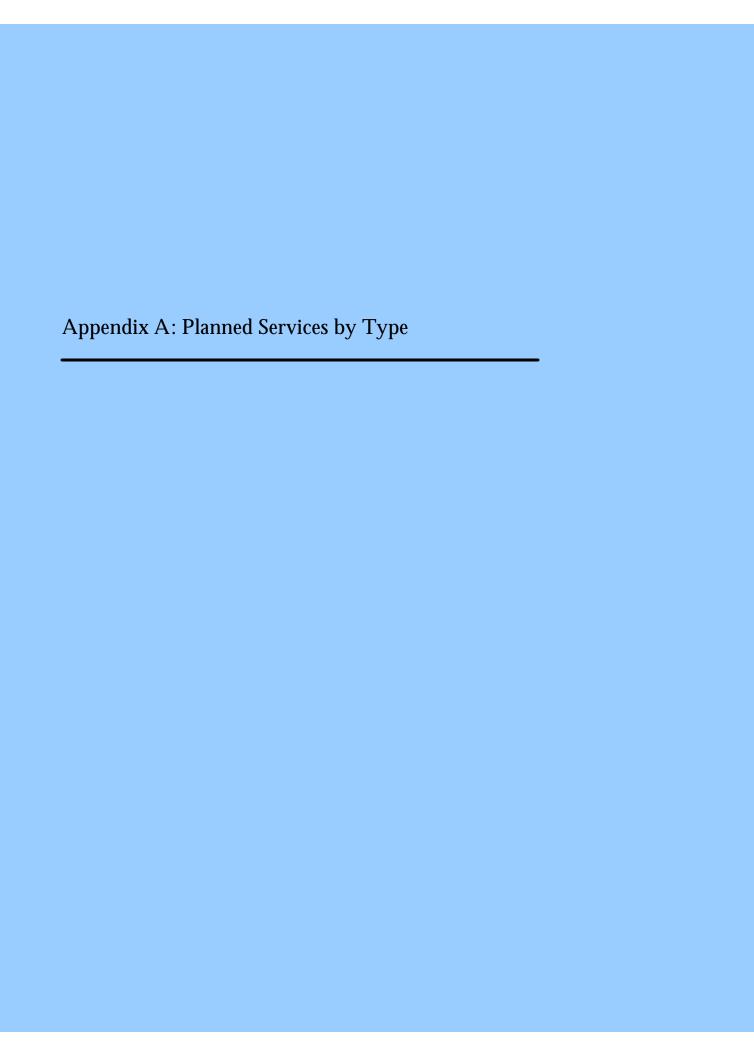
#### V. KEY FEATURES OF THE COUNTY PLANS

The overall analysis of the county plans indicates that there is significant consistency among the 58 counties<sup>10</sup>. Based on the programmatic information provided by the counties, the SACPA services are largely directed and coordinated by health and human service agencies/professionals. In fact, 35 (60.3%) of the 58 counties identified various health and human services related agencies (e.g., department of health services, public health, behavioral health department) as the lead agency. Furthermore, 54 (93.1%) of the counties indicated that county drug abuse agencies would be responsible for the assessment and placement of SACPA-eligible clients. The average percentage of funds to be spent for services (drug treatment and other services) by the 58 counties is 79.2%.

Analysis of FY 2003/04 Plans from the 58 Counties

<sup>&</sup>lt;sup>10</sup> It should be kept in mind that these observations are based upon means for each county grouping. Means can be misleading without consideration of their variability. This section provides only a gross comparison of the data from the county groupings.

There are also some important differences across county size (large, medium, and small). First, the anticipated rate of referrals per 1,000 population was highest for the small counties. Second, the expected increase in total capacity was highest among the small counties. The average of the total capacity increase for the 37 small counties is 50.6%, which was influenced by six counties reporting over a 100.0% capacity increase. If these six counties were not included in determining this average, the increase in capacity for small counties was comparable (14.4%) to the other counties (large and medium).



	N	on-Resid	lential/	Outpat	ient		R	esidenti	al			Other	services		Case Management Activities					
County  Alameda Contra Costa	Treatment/Recovery-No Meds	Treatment/Recovery-Methadone, LAAM, or Other Meds Prescribed	Day Program-Intensive	Detoxification-No Meds	Detoxification-Methadone, LAAM, or Other Meds Prescribed	Detoxification (Hospital)	Detoxification (Non-Hospital)-No Meds	Detoxification (Non-Hospital)-Methadone, LAAM, or Other Meds Prescribed	Freatment/Recovery-No Meds	Treatment/Recovery-Methadone, LAAM, or Other Meds Prescribed	Literacy Training	Family Counseling	Vocational Training	Other Client Services	Referral/Assessment	Placement	Court Monitoring	Supervision	Miscellaneous Activities	
Alameda	V	~	<b>V</b>						V		~	~	~	~	~	~	~	~	~	
Contra Costa	V	~	~		<b>V</b>		~		<b>V</b>		~	~	~	~	~		~	~	~	
Fresno	~	~	~				~		<b>V</b>		~	~	~	~	~	~	~	~	~	
Los Angeles	~	~	~		~	~		~							~		~	~		
Orange	<b>V</b>						~		<b>/</b>			~		>	~			~		
Riverside	<b>'</b>	<b>/</b>			<b>/</b>	>			<b>V</b>			<b>/</b>			<b>'</b>			<b>/</b>	~	
Sacramento	<b>'</b>	<b>/</b>					~		<b>/</b>		/	<b>/</b>	<b>'</b>	>	<b>/</b>	>	<b>'</b>	<b>/</b>	~	
San Bernadino	<b>/</b>	<b>/</b>			<b>/</b>		<b>V</b>		<b>'</b>									~		
San Diego	<b>/</b>		<b>'</b>				<b>V</b>		<b>'</b>					/	~	<b>&gt;</b>	~	~	~	
San Francisco	<b>/</b>	<b>/</b>	<b>/</b>						<b>/</b>		~		~	~	~	~	~	~	~	
Santa Clara	<b>/</b>		<b>/</b>						<b>/</b>					~	~			~		
Ventura	<b>/</b>							I	~	1					<b>✓</b>			<b>/</b>	·	

7	Гable A	2: Plar	ned S	ervic	es by T	'ype u	sing S	SACPA	Fun	ds in t	he 9 I	Mediu	m Co	ınties	s for FY 2003/04					
	N	on-Resid	lential/	Outpat	ient		R	esidenti	al			Other	services		Ca	se Mana	agemen	t Activi	ties	
County	Treatment/Recovery-No Meds	Treatment/Recovery-Methadone, LAAM, or Other Meds Prescribed	Day Program-Intensive	Detoxification-No Meds	Detoxification-Methadone, LAAM, or Other Meds Prescribed	Detoxification (Hospital)	Detoxification (Non-Hospital)-No Meds	Detoxification (Non-Hospital)-Methadone, LAAM, or Other Meds Prescribed	Treatment/Recovery-No Meds	Treatment/Recovery-Methadone, LAAM, or Other Meds Prescribed	Literacy Training	Family Counseling	Vocational Training	Other Client Services	Referral/Assessment	Placement	Court Monitoring	Supervision	Miscellaneous Activities	
Kern	<b>/</b>						~		~		~		<b>/</b>		~			<b>/</b>		
Monterey	<b>/</b>	<b>/</b>							<b>V</b>		~	<b>/</b>	~	>	/			~		
San Joaquin	<b>/</b>	<b>/</b>			<b>/</b>		~		<b>V</b>		~	<b>/</b>	~		/	/				
San Mateo	<b>/</b>	<b>/</b>	>		<b>'</b>		<b>/</b>		<b>V</b>			<b>/</b>		/	~			~		
Santa Barbara	<b>/</b>	<b>/</b>	>				<b>/</b>		<b>V</b>				~	/	~		/	~	<b>\</b>	
Solano	<b>/</b>				<b>✓</b>		<b>/</b>		<b>V</b>		<b>V</b>		~	<b>'</b>	~	~	~	~	<b>/</b>	
Sonoma	<b>/</b>	<b>/</b>	>						<b>V</b>					/	<b>'</b>			~	<b>&gt;</b>	
Stanislaus	<b>/</b>	<b>/</b>	>						<b>V</b>								<b>'</b>	~		
Tulare	<b>/</b>	~	/						~						~			~		

	Гable <i>A</i>	\3: Pla	nned	Servio	es by '	Type ı	using	SACP.	A Fu	ıds in	the 37	7 Smal	l Cou	nties f	for FY	2003	/04		
	N	on-Resid	lential/	Outpat	ient		R	esidenti	al			Other	services		Ca	se Man	agemen	t Activi	ties
County	Freatment/Recovery-No Meds	Treatment/Recovery-Methadone, LAAM, or Other Meds Prescribed	Day Program-Intensive	Detoxification-No Meds	Detoxification-Methadone, LAAM, or Other Meds Prescribed	Detoxification (Hospital)	Detoxification (Non-Hospital)-No Meds	Detoxification (Non-Hospital)-Methadone, LAAM, or Other Meds Prescribed	Freatment/Recovery-No Meds	Treatment/Recovery-Methadone, LAAM, or Other Meds Prescribed	Literacy Training	Family Counseling	Vocational Training	Other Client Services	Referral/Assessment	Placement	Court Monitoring	Supervision	Miscellaneous Activities
Alpine	~	~	<b>V</b>	V	<b>V</b>		V	V	V	. 0	Π	<b>✓</b>	V		<b>✓</b>	<b>V</b>	<b>V</b>	<b>V</b>	
Amador	V	~	~	~	~	~	~	~	<b>V</b>	~	/	~	~	~	~	~	~	~	
Butte	~		~						~								~	~	
Calaveras	V						~		<b>/</b>		/	~	~	~	~	~	~	~	<b>V</b>
Colusa	<b>/</b>								<b>V</b>		>		~	>	~		~	>	>
Del Norte	<b>'</b>		>						<b>V</b>						~	<b>'</b>	~	>	
El Dorado	<b>'</b>	<b>'</b>	>					<b>/</b>	<b>V</b>	<b>✓</b>	>	<b>'</b>	<b>✓</b>	>	~	<b>'</b>	~	>	
Glenn	<b>V</b>								<b>V</b>			<b>V</b>			<b>'</b>	<b>'</b>	<b>'</b>	>	>
Humboldt	<b>'</b>		~				~		<b>V</b>			<b>'</b>			~	~		~	
Impreial	<b>'</b>	<b>/</b>							~					~			<b>'</b>		
Inyo	<b>'</b>								<b>/</b>			~			~			~	<b>/</b>
Kings	<b>'</b>		~				<b>/</b>		<b>V</b>					~	~	~	~	~	
Lake	<b>'</b>						<b>/</b>		<b>/</b>						~	~	~	~	
Lassen	<b>'</b>		<b>V</b>				<b>/</b>		<b>/</b>						~	~	~	~	<b>/</b>
Madera	<b>'</b>						>		<b>V</b>			~			~	~	~	~	<b>/</b>
Marin	<b>'</b>	<b>'</b>	<b>V</b>				>		<b>V</b>			~	~	~	~	~			
Mariposa	<b>'</b>		<b>V</b>				<b>/</b>		<b>V</b>	~	<b>&gt;</b>	~			~	~	~	~	
Mendocino	<b>'</b>								<b>V</b>			~			~		~		
		1		1	1			1							1				
Merced Modoc	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \								<u> </u>			V					~	<b>V</b>	

	N	on-Resid	lential/	Outpat	ient		R	esidenti	al			Other	services		Ca	se Mana	agement	t Activi	ties
County	Freatment/Recovery-No Meds	Treatment/Recovery-Methadone, LAAM, or Other Meds Prescribed	Day Program-Intensive	Detoxification-No Meds	Detoxification-Methadone, LAAM, or Other Meds Prescribed	Detoxification (Hospital)	Detoxification (Non-Hospital)-No Meds	Detoxification (Non-Hospital)-Methadone, LAAM, or Other Meds Prescribed	Freatment/Recovery-No Meds	Treatment/Recovery-Methadone, LAAM, or Other Meds Prescribed	Literacy Training	Family Counseling	Vocational Training	Other Client Services	Referral/Assessment	Placement	Court Monitoring	Supervision	Miscellaneous Activities
Mono	~								<b>V</b>	[ . ]						I	)	<b>V</b>	
Napa	1						~		<b>V</b>			~		~	~	~	~	~	~
Nevada	V		~				-	~	~		<b>V</b>	~	~	-	~	~	~	~	~
Placer	V		~				~		<b>/</b>	~		~		~	~	~	~	~	~
Plumas	~		~			~	~		<b>/</b>			~		~	~	~	~	/	~
San Benito	~	~			~		~		/			~						~	~
San Luis Obispo	V													~	~	~	~	~	
Santa Cruz	<b>/</b>	<b>'</b>	>				>		<b>&gt;</b>		~		>	~	>			<b>/</b>	
Shasta	<b>/</b>		<b>/</b>						<b>/</b>									<b>'</b>	
Sierra	<b>/</b>								/		<b>V</b>				>	>	<b>&gt;</b>	/	~
Siskiyou	<b>/</b>		<b>/</b>				<b>/</b>		<b>/</b>								/		
Sutter	~		>						>		<b>/</b>	~	<b>/</b>						
Tehama	~		<b>V</b>						/			~						~	
Trinity	<b>/</b>		<b>V</b>						<b>/</b>						~	~	~	~	
Tuolumne	~								<b>/</b>						~		~	~	
Yolo	<b>/</b>	~	<b>V</b>				<b>/</b>		<b>/</b>		<b>✓</b>	<b>V</b>	<b>V</b>	<b>V</b>	<b>/</b>	~	<b>/</b>	<b>/</b>	<b>/</b>
Yuba			<b>/</b>		<b>/</b>				~								<b>'</b>		

Appendix B: FY 2001/02, FY 2002/03, and FY 2003/04 County Plan Comparisons

#### APPENDIX B: FY 2001/02, FY 2002/03, AND FY 2003/04 COUNTY PLAN COMPARISONS

With three years of county plans available, it is possible to begin identifying any trends in the counties' data. This appendix contains such an analysis. Note that these data reflect the counties' planning and not actual experience. For example, the county plans forecast how funds will be used. They are not an accounting for how funds were or are actually used.

#### Comparison of Mean Planned Court/Probation Referral Rates for FY 2001/02, 2002/03, and 2003/04

In their plans, each county must estimate the number of referrals to SACPA from the courts/probation and parole. Court/Probation referrals will be discussed first, and then parole referrals.

Table 1: Com	parison of the	Mean Planne	d Court/Prob	ation Referrals per	Thousand County	Population for Sn	nall, Medium, and La	arge Counties
County	Mean Planned Number of Referrals (FY 01/02)	Mean Planned Number of Referrals (FY 02/03)	Mean Planned Number of Referrals (FY 03/04)	Mean Planned Referrals/1000 County Population (FY 01/02)	Mean Planned Referrals/1000 County Population (FY 02/03)	Mean Planned Referrals/1000 County Population (FY 03/04)	% Change between Mean Planned Referrals/1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Referrals/1000 County Population (FY 02/03 to FY 03/04)
Small Counties	218	172	170	3.00	2.32	2.22	-22.67%	-4.31%
Medium Counties	1,568	1,346	996	2.95	2.68	1.96	-9.15%	-26.87%
Large Counties	3,433	3,113	3,236	1.91	1.38	1.55	-27.75%	12.32%

Table 1 presents a comparison of the mean planned court/probation referrals per thousand county population for small, medium and large counties. Figure 1 presents these data graphically. As can be seen, there was a decrease in the mean rate of planned referrals per thousand county population from court/probation between FY 2001/02

3.50

Small Counties

Small Counties

Medium Counties

Medium Counties

Medium Counties

Large Counties

Figure 1: Comparison of the Mean Planned Court/Probation Referrals per Thousand County Population for Small, Medium and Large Counties

<sup>&</sup>lt;sup>1</sup> Rates per thousand calculations are used in order to control for differing county populations. This enables direct comparisons of rates among counties of differing size.

and FY 2003/04 in the small, medium, and large counties. Between FY 2001/02 and FY 2002/03, there was a 22.67% decrease in the mean rate of planned referrals per thousand population from courts/probation for small counties, a 9.15% decrease for medium counties and a 27.75% decrease for large counties. Between FY 2002/03 and FY 2003/04, there were planned decreases in referral rates for small counties (4.31%) and medium counties (26.87%). In contrast, the large counties were planning for an increase (12.32%) in referrals between FY 2002/03 and FY 2003/04. The counties have planned for fewer referrals into SACPA over the three years. Additionally, the small and medium counties have planned for a higher rate of referrals from the courts/probation than have the large counties.

Comparison of Mean Planned Parole Referrals Planned Referrals for FY 2001/02, 2002/03, and 2003/04 Each county must also estimate the number of referrals to SACPA from the parole system.

Table 2:	Comparison o	f the Mean Pl	lanned Parole	Referrals per Thou	ısand County Popu	ılation for Small, N	<b>Medium, and Large C</b>	Counties
County	Mean Planned Number of Referrals (FY 01/02)	Mean Planned Number of Referrals (FY 02/03)	Mean Planned Number of Referrals (FY 03/04)	Mean Planned Referrals/1000 County Population (FY 01/02)	Mean Planned Referrals/1000 County Population (FY 02/03)	Mean Planned Referrals/1000 County Population (FY 03/04)	% Change between Mean Planned Referrals/1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Referrals/1000 County Population (FY 02/03 to FY 03/04)
Small Counties	29	23	27	0.42	0.29	0.31	-30.95%	6.90%
Medium Counties	150	158	94	0.29	0.29	0.17	0.00%	-41.38%
Large Counties	412	355	414	0.22	0.19	0.16	-13.64%	-15.79%

Table 2 presents a comparison of the mean planned parole referrals per thousand county population for small, medium and large counties. Figure 2 presents these data graphically. For the small counties, the FY 2002/03 planned rate of parole referrals decreased from FY 2001/02 and increased again in FY 2003/04. For the medium counties the number of planned parole referrals between FY 2001/02 and FY 2002/03

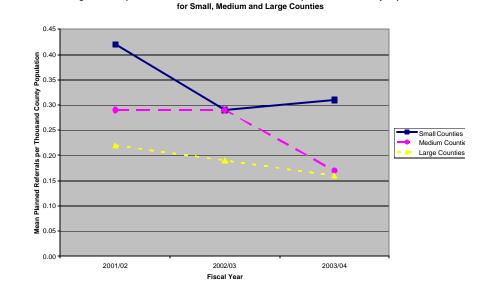


Figure 2: Comparison of the Mean Planned Parole Referrals per Thousand County Population

were fairly consistent but decreased for FY 2003/04. For the large counties, there is a decrease in planned

parole referrals over the three fiscal years. The large counties anticipated the lowest rates of referrals from parole among the three county groupings.

Comparison of Total Mean Planned Parole and Probation Referrals for FY 2001/02, 2002/03, and 2003/04

Table 3: Compariso	on of the Tota	l Mean Plann	ed Parole and	<b>Probation Referra</b>	ls per Thousand Co	ounty Population fo	or Small, Medium, a	nd Large Counties
County	Mean Planned Number of Referrals (FY 01/02)	Mean Planned Number of Referrals (FY 02/03)	Mean Planned Number of Referrals (FY 03/04)	Mean Planned Referrals/1000 County Population (FY 01/02)	Mean Planned Referrals/1000 County Population (FY 02/03)	Mean Planned Referrals/1000 County Population (FY 03/04)	% Change between Mean Planned Referrals/1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Referrals/1000 County Population (FY 02/03 to FY 03/04)
Small Counties	247	195	197	3.42	2.62	2.53	-23.39%	-3.44%
Medium Counties	1,718	1,503	1,091	3.24	2.97	2.13	-8.33%	-28.28%
Large Counties	3,846	3,468	3,650	2.13	1.57	1.71	-26.29%	8.92%

Table 3 presents a comparison of the mean planned total probation and parole referrals per thousand county population for small, medium and large counties. Figure 3 presents these data graphically. Overall, each county group planned for decreasing rates of referrals from the courts/probation and parole over the three years of SACPA implementation. Only the large counties anticipated a small increase in referral rate (8.92%)

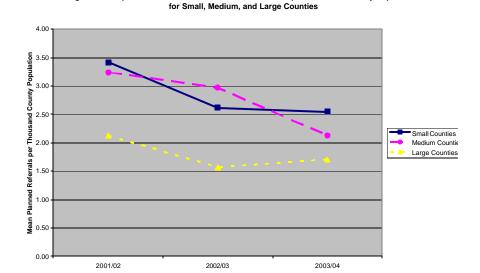


Figure 3: Comparison of the Mean Planned Total Referrals per Thousand County Population

between FY 2002/03 and FY 2003/04. In all years, however, the planned rates of referral for the small and medium counties are much larger than those for the large counties. In sum, the counties planned for a decreasing rate of referrals to SACPA from FY 2001/02 to FY 2003/04. There are many plausible explanations for this decrease, but the simplest may be that each county's projection was based upon its previous year's actual experience. The county plans, however, do not contain data about actual referrals.

#### **Fiscal Analysis**

#### Comparison of Mean Planned Carryover for FY 2001/02, 2002/03, and 2003/04

Many counties, regardless of size, have budgeted for contingencies in order to create a flexible reserve that could be spent to meet changing requirements under SACPA, some of which could not be anticipated. This "carry over funding," plus funds planned to be spent in FY 2001/02, 2002/03, and 2003/04 will be reviewed in this section.

Table -	4: Comparison o	f the Mean Plan	ned Carryover p	er Thousand C	ounty Populatio	on for Small, M	edium, and Large Co	ounties
County	Mean Planned Carryover (FY 01/02)	Mean Planned Carryover (FY 02/03)	Mean Planned Carryover (FY 03/04)	Mean Planned Carryover/ 1000 County Population (FY 01/02)	Mean Planned Carryover/ 1000 County Population (FY 02/03)	Mean Planned Carryover/ 1000 County Population (FY 03/04)	% Change between Mean Planned Carryover/1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Carryover/1000 County Population (FY 02/03 to FY 03/04)
Small Counties	\$166,872	\$228,668	\$255,764	\$4,862	\$9,554	\$12,238	96.48%	28.10%
Medium Counties	\$707,015	\$1,060,927	\$955,927	\$1,409	\$2,157	\$1,906	53.12%	-11.66%
Large Counties	\$3,259,779	\$3,682,448	\$2,579,874	\$1,520	\$2,285	\$1,527	50.30%	-33.18%

Table 4 presents the mean planned rate of carryover for the small, medium and large counties. Figure 4 presents these data graphically.

The planned mean carryover rate for the small counties increased in each of the three years analyzed in this report. The medium and large counties planned for an increase in carryover rate in FY 2002/03, but decreased their planned carryover rate in FY 2003/04. Overall, the medium and

\$12,000 \$10,000 \$8,000 \$8,000 \$6,000 \$4,000 \$2,000 \$2,000 \$2,000 \$2,000 \$5,000 \$2,000 \$5,000 \$6,000

Figure 4: Comparison of the Mean Planned Carryover per Thousand County Population for

Small, Medium, and Large Counties

large counties had a significantly smaller rate of carryover over the three-year period compared to the small counties. This is particularly noticeable in FY 2003/04, where the small counties were planning to carryover at a rate of 8 times that of the medium or large counties.

### Comparison of Mean Planned Expenditures for Treatment-Related Services for FY 2001/02, 2002/03, and 2003/04

Table 5: C	Comparison of th	e Mean Planned	Expenditures fr	om Treatment a	nd Other Servic	es for Small, Me	dium, and Large C	ounties
County	Expenditure (FY 01/02)		Mean Planned Expenditure/ 1000 County Population (FY 01/02)	Mean Planned Expenditure/ 1000 County Population (FY 02/03)	Mean Planned Expenditure/ 1000 County Population (FY 03/04)	% Change between Mean Planned Expenditure/ 1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Expenditure/ 1000 County Population (FY 02/03 to FY 03/04)	
Small Counties	\$439,147	\$537,889	\$446,528	\$12,356	\$13,333	\$9,237	7.91%	-30.72%
Medium Counties	\$1,935,177	\$1,917,211	\$1,696,339	\$3,835	\$3,884	\$3,284	1.27%	-15.45%
Large Counties	\$5,966,630	\$10,733,934	\$7,279,419	\$3,252	\$6,671	\$3,347	105.12%	-49.83%

Table 5 presents the mean planned expenditure rates for treatment-related services by each group of counties. Figure 5 presents these data graphically. For the small counties, their mean rate of expenditure on treatment-related services increased in FY 2002/03 and then decreased again in FY 2003/04. The medium counties' mean rate of planned expenditures on treatment-related services remained fairly constant between FY

\$12,000 \$10,000 \$10,000 \$8,000 \$6,000 \$6,000 \$2,000 \$2,000 \$2,000 \$10,

Figure 5: Comparison of the Mean Planned Expenditures from Treatment and Other Services

per Thousand County Population for Small, Medium, and Large Counties

2001/02 and then decreased slightly in FY 2003/04. The large counties planned to nearly double their rate of expenditure in FY 2002/03 in comparison to FY2001/02. Their planned rate of treatment–related expenditures decreases in FY 2003/04 to a level similar to their FY 2001/02 plan. Over the three year period, the small counties had the highest rates of planned expenditure per thousand population for treatment-related services when compared with the medium or large counties.

## Comparison of Mean Planned Expenditures for Criminal Justice Services for FY 2001/02, 2002/03, and 2003/04

Table 6	b: Comparison o	of the Mean Pla	nned Expendit	ures from Crimi	nal Justice Servi	ces for Small, M	ledium, and Large C	ounties
County	Mean Planned Expenditure (FY 01/02)	Mean Planned Expenditure (FY 02/03)	Mean Planned Expenditure (FY 03/04)	Mean Planned Expenditure/ 1000 County Population (FY 01/02)	Mean Planned Expenditure/ 1000 County Population (FY 02/03)	Mean Planned Expenditure/ 1000 County Population (FY 03/04)	% Change between Mean Planned Expenditure/1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Expenditure/1000 County Population (FY 02/03 to FY 03/04)
Small Counties	\$99,772	\$123,005	\$128,347	\$3,214	\$3,344	\$3,002	4.03%	-10.22%
Medium Counties	\$342,186	\$382,140	\$433,241	\$702	\$798	\$866	13.58%	8.57%
Large Counties	\$1,498,789	\$1,872,530	\$1,892,125	\$898	\$973	\$1,021	8.28%	4.97%

Table 6 presents the mean planned expenditures for criminal justice services over the three planning years. These data are also shown in Figure 6.

The small counties have shown an increased rate of expenditures for criminal justice services between FY 2001/02 and FY 2002/03, with a decrease from FY 2001/02 to FY 2003/04. The medium and large counties planned for a slight increase between FY 2001/02 and FY

Fiscal Year

2003/04

Figure 6: Comparison of the Mean Planned Expenditures from Criminal Justice Services per Thousand County Population for Small, Medium, and Large Counties

2003/04. The small counties planned rates of expenditures on criminal justice services nearly triple those of the large counties.

2001/02

#### Comparison of Mean Planned Total Expenditures for FY 2001/02, 2002/03, and 2003/04

	Table 7: (	Comparison of t	he Total Mean	Planned Expend	litures for Small	l, Medium, and	Large Counties	
County	Mean Planned Expenditure (FY 01/02)	Mean Planned Expenditure (FY 02/03)	Mean Planned Expenditure (FY 03/04)	Mean Planned Expenditure/ 1000 County Population (FY 01/02)	Mean Planned Expenditure/ 1000 County Population (FY 02/03)	Mean Planned Expenditure/ 1000 County Population (FY 03/04)	% Change between Mean Planned Expenditure/1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Expenditure/1000 County Population (FY 02/03 to FY 03/04)
Small Counties	\$534,461	\$582,154	\$574,957	\$15,448	\$15,232	\$12,238	-1.40%	-19.65%
Medium Counties	\$2,277,363	\$2,299,352	\$2,129,579	\$4,538	\$4,682	\$4,150	3.17%	-11.36%
Large Counties	\$7,465,420	\$12,606,463	\$9,171,544	\$4,150	\$7,643	\$4,368	84.16%	-42.85%

Table 7 presents the mean total planned expenditures over the three planning years. These data are also shown graphically in Figure 7. The mean planned total expenditure per thousand county population show a decrease for the small counties between FY 2001/02 and FY 2003/04. For the medium counties, the rate of mean planned expenditures is relatively consistent over the three years. The mean rates of

Population for Small, Medium, and Large Counties \$18,000 \$16,000 Planned Total Expenditures per Thousand County \$14,000 \$12,000 § \$10,000 Small Counties Medium Counties Large Counties \$8,000 \$6,000 \$2,000 2001/02 2002/03 2003/04

Figure 7: Comparison of the Mean Planned Total Expenditures per Thousand County

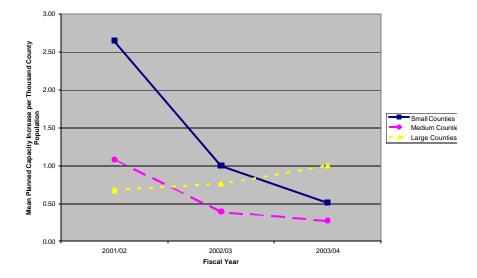
planned total expenditure for the large counties showed a "spike" in FY 2002/03.

# Comparison of Mean Planned Capacity Increase for FY 2001/02, 2002/03, and 2003/04 in Non-Residential Drug Treatment

Table 8: Co	omparison of the	e Mean Planned	Capacity Increas	e in Non-Reside	ential Drug Trea	atment for Sma	ll, Medium, and Larş	ge Counties
County	Mean Planned Capacity Increase (FY 01/02)	Mean Planned Capacity Increase (FY 02/03)	Mean Planned Capacity Increase (FY 03/04)	Mean Planned Capacity Increase/ 1000 County Population (FY 01/02)	Mean Planned Capacity Increase/ 1000 County Population (FY 02/03)	Mean Planned Capacity Increase/ 1000 County Population (FY 03/04)	% Change between Mean Planned Capacity Increase/ 1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Capacity Increase/ 1000 County Population (FY 02/03 to FY 03/04)
Small Counties	151	41	22	2.65	1.00	0.51	-62.26%	-49.00
Medium Counties	488	209	187	1.08	0.39	0.27	-63.89%	-30.77%
Large Counties	1,436	1,439	1,464	0.68	0.76	1.00	11.76%	31.58%

Table 8 presents the mean planned capacity change per thousand county population in non-residential drug treatment over the three years. These data are also shown graphically in Figure 8. The small and medium counties planned to decrease their non-residential drug treatment per thousand population over the three-year period, whereas the large counties planned for a capacity increase during the same time.

Figure 8: Comparison of the Mean Planned Capacity Increase in Non-Residential Drug Treatment per Thousand County Population for Small, Medium, and Large Counties



### Comparison of Mean Planned Capacity Increase for FY 2001/02, 2002/03, and 2003/04 in Residential Drug Treatment

Table 9: 0	Comparison of tl	ne Mean Planned	l Capacity Increa	ase in Residentia	l Drug Treatme	nt for Small, Me	dium, and Large C	ounties
County	Mean Planned Capacity Increase (FY 01/02)	Mean Planned Capacity Increase (FY 02/03)	Mean Planned Capacity Increase (FY 03/04)	Mean Planned Capacity Increase/1000 County Population (FY 01/02)	Mean Planned Capacity Increase/1000 County Population (FY 02/03)	Mean Planned Capacity Increase/1000 County Population (FY 03/04)	% Change between Mean Planned Capacity Increase/ 1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Capacity Increase/ 1000 County Population (FY 02/03 to FY 03/04)
Small Counties	20	10	6	0.64	0.27	0.19	-57.81%	-29.63%
Medium Counties	26	31	15	0.06	0.05	0.03	-16.67%	-40.00%
Large Counties	221	543	224	0.12	0.34	0.17	183.33%	-50.00%

Table 9 presents the mean planned change in capacity in residential drug treatment over the three planning years. These data are also shown graphically in Figure 9. In the small counties, there was a decrease in the mean rate of planned capacity expansion in residential drug treatment per thousand county population between FY 2001/02 and FY 2003/04. For the medium counties, the mean rate of capacity expansion in residential drug

Fiscal Year

Figure 9: Comparison of the Mean Planned Capacity Increase in Residential Drug Treatment per Thousand County Population for Small, Medium, and Large Counties

treatment per thousand county population show a slight decrease. For the large counties, the mean rates of capacity expansion in residential drug treatment per thousand county population showed a "spike" in FY 2002/03.

### Comparison of Mean Planned Total Capacity Increase for FY 2001/02, 2002/03, and 2003/04 in Drug Treatment

	Table 10: Cor	nparison of the	Гotal Mean Plan	ned Capacity In	crease for Small,	Medium, and La	arge Counties	
County	Mean Planned Capacity Increase (FY 01/02)	Mean Planned Capacity Increase (FY 02/03)	Mean Planned Capacity Increase (FY 03/04)	Mean Planned Capacity Increase/1000 County Population (FY 01/02)	Mean Planned Capacity Increase/1000 County Population (FY 02/03)	Mean Planned Capacity Increase/1000 County Population (FY 03/04)	% Change between Mean Planned Capacity Increase/ 1000 County Population (FY 01/02 to FY 02/03)	% Change between Mean Planned Capacity Increase/ 1000 County Population (FY 02/03 to FY 03/04)
Small Counties	255	74	38	5.24	1.75	1.01	-66.60%	-42.29%
Medium Counties	638	320	266	1.38	0.60	0.43	-56.52%	-28.33%
Large Counties	1,856	2,077	1,753	0.95	1.19	1.21	25.26%	1.68%

Table 10 presents the mean planned total capacity over the three planning years. These data are also shown graphically in Figure 10. There was a decrease in the mean rate of planned total capacity increase per thousand county population between FY 2001/02 and FY 2003/04 in the small and medium counties. The mean rate of planned total capacity increase per thousand county population for the large counties showed a slight increase over the three years.

Small Counties

Small Counties

Small Counties

August Aug

Figure 10: Comparison of the Mean Planned Total Capacity Increase per Thousand County Population for Small, Medium, and Large Counties

#### Summary

There are several observations arising out of this comparison of the FY 2001/02, FY 2002/03, and FY 2003/04 county plans, including:

- Overall, the counties have planned for fewer referrals into SACPA over the three years.
- The small and medium counties have planned for a higher rate of referrals from the courts/probation than have the large counties.
- The large counties planned for the lowest rates of referrals from parole among the three county groupings. In FY 2002/03, the large counties planned a rate of referrals that was over half of that planned for by the small and medium counties.

- The medium and large counties had a significantly smaller rate of carryover in all three years compared to the small counties. This is particularly noticeable in FY 2003/04, where the small counties were planning a carryover rate 6 times that of the medium counties and 8 times that of the large counties.
- Over the three-year period, the small counties planned rates of expenditures per thousand population for treatment-related services have been much greater than that of the medium and large counties.
- Over the three-year period, the small, medium, and large counties have all increased their planned expenditure for criminal justice services.
- The small counties planned rates of expenditures on criminal justice services nearly triple those of the large counties.
- There was no apparent consistency across the three years in how the three groups of counties were planning to expend their total funds available.
- The small and medium counties were planning to decrease their non-residential drug treatment capacity at a decreasing rate over the three years, while the large counties were planning to remain relatively stable.
- Little consistency was found between the three county groups with regard to residential capacity expansion, but the large counties planned for large expansions in FY 2002/03.
- Over the three years, the small and medium counties were planning for a decreased rate of total capacity increase, while the large counties were planning for an initial increase and then a slight decrease.

Appendix C: Stated Reasons for Service Reductions in the FY 2003/04 County Plan

				Append	lix C: St	ated Reas	son for Se	rvice Re	ductions	in the F	Y 2003/04	County	y Plans				
County	Planned FY 2003/04 Carryover	Reduction in services due to little or no remaining carryover and/or State allocation	Prop 36 funding constraints limits the county's ability to increase residential services, causing a shift from long-term residential to short-term residential services for patients	n services due to a decrease in non- nd educational services	Reduction in services due to one time start-up funds being exhausted	Reduction in services due to eligible clients already haven been served in the last 2 years	Intensity of treatment levels increased because the severity of addiction for many SACPA clients remains higher than originally anticipated	Not yet reported total spent in FY $2002/03$	Reduction in services reflect actual referrals and services provided from the previous year(s)	Reduction in drug testing Prop. 36 clients due to county budget shortfalls	Reduction in services due to rising costs (i.e., staff increases, wage and benefit increases, indirect and direct costs)	Reduction in services because of loss of staff	There has been an increase in outpatient and residential services, but there was a reduction in overall services due to the county's refusal to fund ancillary services	An increase in the number of SACPA participants challenged the agency's ability to maintain adequate continuum of treatment and care for defendants who have, statewide, presented a higher acuity profile than anticipated	Reduction in services after a determination was made that Lev III programs and perinatal services do not meet the definition of intensive day treatment and therefore are not paid for with SACPA funds	Reduction in services due to counties learning that there are options for misdemeanor offenders other than treatment	Apparent reduction in services is because the data do not take into account clients who receive more than one service
Contra Costa	\$468,139.00										<b>V</b>			V			
Glenn	\$187,163.00														~		
Imperial	\$288,345.00								<b>V</b>								
Kern	\$1,699,985.00								<b>V</b>							<b>&gt;</b>	
Kings	\$60,692.00												<b>V</b>				
Lake	\$125,000.00																~
Lassen	\$171,871.00									>							
Madera	\$275,769.00								<b>V</b>								
Mariposa	\$0.00										<b>V</b>						
Modoc	\$250,350.00											~					
Mono	\$41,595.00								<b>V</b>								
Napa	\$673,000.00								~								
Nevada	\$248,585.00								<b>~</b>								
Orange	\$1,069,444.00						<b>/</b>										
Riverside	\$383,730.00	<b>'</b>															
San Diego	\$2,032,190.00		<b>✓</b>	~													
San Luis Obispo	\$98,978.00	~									<b>/</b>						
San Mateo	\$493,409.00	~							<b>'</b>								
Santa Clara	\$1,168,896.00																
Santa Cruz	\$292,188.00				~	~			<b>V</b>								
Stanislaus	\$0.00	~									<b>V</b>	-					
Tehama	\$145,463.00							<b>✓</b>									